When Application and A are completed, please su		Please check one: State Transfer (SDCL 3-9)	•
State Board of Finance Office of Secretary of Stat 500 E Capitol Ave Pierre SD 57501 P	hone: 605-773-3537	Full-time continuous employ Professional Recruitment Attach a written copy of the offe moving expenses.	
PLEASE NOTE: The Rethan 5:00 p.m. CT on the processed at the next Boa	equest and all supporting documentation of I will be the Board of I and of Finance meeting. All documents on ally identifiable information.	on must be received in the Office Finance meeting. Documentation tation MUST comply with Bures	received after that time will be
•	Appl	ication	
Dylan Peterson		Conservation Officer	SD GF&P
Name of Applicant		New Position Title	Agency Employed By
39,915.20	Sioux City, Iowa	Onida, SD	May/2019
Yearly Salary	City, State Moving From	New Post of Duty (City) April 9th 2019	Expected Month/Year of Move
Bureau of Human Resource	ces Class Code	Employment Date with the State	
expenses constitutes fring employee if they had dire (3) if the move is 50 miles I certify that I have m the eligible moving expen	or reporting moving expenses for emple benefits excludable from the employetly paid or incurred these expenses, for more from the employee's former et the above listed criteria. I understance will not be reported as taxable incat ultimately I am responsible for the particular transfer or transfer	yee's gross income if (1) the amo (2) the employee did not deduct t residence. and the reimbursement by the State ome to the IRS. While this reimbursement	unts would be deductible by the the expenses in a prior year, and of South Dakota for payment of ursement will not be reported as
Signature of Applicant	1 Anna Carlo Maria	Date	
hatthe agency ordered the The Agent further declares	and thereby certifies that the above individual end applicant to move as indicated, and is that, to the best of the Agent's knowing expenses are true and correct.	that the move will be for the bene-	fit of the State of South Dakota.
<u> </u>	11 0	D 1 CE'	
Approved by the State Board of Finance on		e Board of Finance	nance

Note: When completed, retain one copy in employee personnel file and attach original to voucher to be sent to Auditor's Office.

Household Moving Allowance Fill Ins 20151117.doc



SOUTH DAKOTA DEPARTMENT OF GAME, FISH AND PARKS

1550 EAST KING AVENUE | CHAMBERLAIN, SD 57325

April 8, 2019

Dylan Peterson PO Box 547 Onida, SD 57564

Dear Dylan:

Congratulations on your successful completion of the Wildlife Training Officer Program. By this letter, I am advising that effective April 9, 2019 you will be permanently assigned to the vacant conservation officer duty station in Onida. District Conservation Officer Supervisor Josh Carr will serve as your immediate supervisor. There is no salary adjustment associated with this transfer, your hourly wage will remain \$18.09. */9.5

Once you have relocated your residence to Onida, but no later than May 7, 2019, your assigned duty station will become your home station for purposes of travel reimbursement expenses. State rules allow the agency to pay per diem (meals & lodging) up to a maximum of 20 working days during this timeframe from April 9 – May 7, 2019 while you are relocating.

Because we feel it to be important for our conservation officers to form close relationships with citizens in the communities they serve, I strongly encourage you to live within the community designated as your home duty station. We do have an "Employee Living Distance Policy" which states the following:

"Except upon prior authorization from the Wildlife Division Director, conservation officers and other law enforcement staff who are assigned agency vehicles must live within 10 miles of the community designated as their assigned duty station. Officer requests to live more than 10 miles from their assigned duty station or outside of their designated work district will be evaluated to ensure the distance will not interfere with job duties, not affect response time, not hamper public services, and is appropriate considering all factors. The Wildlife Division Director may stipulate the state be reimbursed for use of the assigned vehicle as a condition of approval."

You should have been provided a Household Moving Allowance application, along with copies of the applicable statutes/rules pertaining to moving expenses, via email. If you have not received this please let me know and I will get a copy to you immediately. Please complete this form as soon as possible once your move is complete and submit the forms and supporting documentation to Rachel Comes. She will process your application and gain approval for your move from the Board of Finance at their next regular meeting. Please note that the Board of Finance only meets once a month.









SOUTH DAKOTA DEPARTMENT OF GAME, FISH AND PARKS

1550 EAST KING AVENUE | CHAMBERLAIN, SD 57325

As per the rules governing moves, you may contact a household moving company and have them move you or you may rent a moving truck or trailer and move your household goods yourself. Please be sure to keep any bills or receipts associated with your move. Finally, the state will reimburse you high rate mileage one time (one way) to move your personal vehicle to your new duty station, so please be sure to include that reimbursement request on your travel reimbursement request.

We are excited to have you permanently assigned to the Onida WCO duty station and welcome you as a new Region 2 employee. If you have any questions, don't hesitate to contact your immediate supervisory staff or me.

Sincerely.

Mark Ohm

Regional Supervisor

CC:

Jeff Wilson, Human Resources Manager
Tony Leif, Wildlife Division Director
Andy Alban, Law Enforcement Administrator
Brandon Gust, Law Enforcement Training Supervisor
Steve Rossow, Regional Conservation Officer Supervisor
Josh Carr, District Conservation Officer Supervisor
Rachel Comes, Executive Secretary

When Application and Authorization sections	Please check one:	
are completed, please submit the original to:	State Transfer (SDCL 3-9	-9)
State Board of Finance	Full-time continuous employ	
Office of Secretary of State	Professional Recruitment	
500 E Capitol Ave		r of employment and of payment of
Pierre SD 57501 Phone: 605-773-3537	moving expenses.	
PLEASE NOTE: The request and all supporting documentat	ion must be received in the Offi	ce of the Secretary of State no
later than 5:00 p.m. CT eight days prior to the Board Documentation received after that time will be processed at	of Finance meeting on the t	hird Tuesday of the month.
comply with Bureau of Human Resources policies regarding pro	ntection of personally identifiable	information
Appl	ication Executive	
DAUD CAMPBELL	Sociant 4.7	SNHP
Name of Applicant	Sergeant unit New Position Title	Agency Employed By
		<u> </u>
\$63,939 (\$30.74x2080) (ovegory 150	New Post of Duty (City)	June 12019 Expected Month/Year of Move
Yearly Salary City Atate Moving From	New Post of Duty (City)	Expected Month/Year of Move
666654	11/52/11	
	///32/// Employment Date with the State	
Bureau of Human Resources Class Code	Employment Date with the State	
Dar Cufble	5/21/19	
Signature of Applicant	Date	
Author		
Audio	rization	
The undersigned agent hereby certifies that the above individual that the agency ordered the applicant to move as indicated, and the Agent further declares that, to the best of the Agent's knowled actual household moving expenses are true and correct.	idual is employed in a full-time po hat the move will be for the benefi	t of the State of South Dakota.
The undersigned agent hereby certifies that the above individual that the agency ordered the applicant to move as indicated, and the Agent further declares that, to the best of the Agent's knowless.	idual is employed in a full-time po hat the move will be for the benefi	it of the State of South Dakota. uthorization for reimbursement
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SOUTH DAKOTA HIGHWAY PATROL

DIVISION HEADQUARTERS

118 West Capitol Avenue Pierre, South Dakota 57501 Telephone: 605·773·3105 Fax: 605·773·6046 Web: dps.sd.gov/enforcement/highway_patrol/

December 19, 2018

Dave Campbell 202 E 11th St. Gregory, SD 57533

Dear Dave,

Please accept this letter as "congratulations" and official notice of your promotion to Sergeant. Effective December 24, 2018, you will fill the Sergeant position for the Executive Protection Unit.

Your rate of pay will increase to \$30.74 per hour. You will be eligible for an increase to the base pay for Sergeant after you have been filling the role for 1 year which is December 24, 2019. The increase to base pay will be at the discretion of the Superintendent.

Dave, I am sure you are anxious to begin this new challenge and I am confident that you are prepared for the commitment this supervisory staff position requires. Please feel free to contact me should any questions arise.

Regards,

Colonel Craig Price SDHP Superintendent

CP:ao

cc: Susan Isaacson, BHR Mary Walter Personnel file



When Application and Authorization sections	Please check one:
are completed, please submit the original to:	State Transfer (SDCL 3-9-9)
State Board of Finance	Full-time continuous employment for 6 months.
Office of Secretary of State	\
500 E Capitol Ave	Professional Recruitment (SDCL 3-9-12)
Pierre SD 57501 Phone: 605-773-3537	Attach a written copy of the offer of employment and of payment of moving expenses.
PLEASE NOTE: The Request and all supporting documentation than 5:00 p.m. CT on the Thursday prior to the Board of Finance meeting. All document regarding protection of personally identifiable information. Applic	n must be received in the Office of the Secretary of State no later mance meeting. Documentation received after that time will be ation MUST comply with Bureau of Human Resources policies
Mall. Dogg	OD Carcultant BHR
Lury Dean	New Position Title Agency Employed By
Name of Applicant	New Position Title Agency Employed By
Yearly Salary City, State Moving From	Pierre 5D 04 2019 New Post of Duty (City) Expected Month/Year of Move
Yearly Salary City, State Moving From Bureau of Human Resources Class Code	New Post of Duty (City)
subject to the limitations established by South Dakota law. I she expenses. The IRS regulation for reporting moving expenses for emplexpenses constitutes fringe benefits excludable from the employemployee if they had directly paid or incurred these expenses, (3) if the move is 50 miles or more from the employee's former in a certify that I have met the above listed criteria. I understand	d the reimbursement by the State of South Dakota for payment of me to the IRS. While this reimbursement will not be reported as
Author	rization
The undersigned agent hereby certifies that the above agence will be for the benefit of the State of South Dakota. The Agent for request and authorization for reimbursement of actual household. Name of Authorized Agent Signature of Authorized Agent Date	orther declares that to the best of my knowledge and belief the
Approval by State	Board of Finance
Approved by the	
State Board of	
Finance on	
	e of Secretary, State Board of Finance

Note: When completed, retain one copy in employee personnel file and attach original to voucher to be sent to Auditor's Office.



Bureau of Human Resources 500 East Capitol Avenue Pierre, South Dakota 57501-5070 Phone: 605.773.3148 Fax: 605.773.4344 http://bhr.sd.gov

December 28, 2018

Cathy Dean 6430 Orion Rd Rochester Hills MN 48306

Dear Ms. Dean,

This letter is to confirm your appointment to the position of Exempt Human Resource Analyst with the Bureau of Human Resources, in Pierre, SD. This position will begin effective January 22, 2019 at \$49,000/annually. You may contact Heather Perry, your immediate supervisor if you have any questions.

Prior to your first day of work, we invite you to take the time to complete the on-line orientation process. Completion of the on-line orientation process is voluntary. If you decide to forego the on-line process prior to beginning work, you will be asked to complete the same process on your first day of work.

Please go to the following link to complete the new employee forms: http://onlineorientation.sd.gov/new.aspx

You can log into the system using the following ID and password:

Employee ID - IDCD10157

Employee Password - Password

*You will be prompted to set and confirm a new password upon entering the above and selecting, "login".

*This is a secured system that is user name & password protected.

NOTE: You can complete this on-line orientation as time permits. You can save the information that you enter as you step through the process. Therefore, if you need to come back to complete the process at a later date or time, you may do so by entering your user ID and password. You may need to disable the pop-up blocker on your computer in order to access the orientation material.

In compliance with the Immigration Reform and Control Act of 1986, the State of South Dakota hires only citizens and nationals of the United States and aliens authorized to work in the United States. Upon reporting to work, you will be required to provide identification and proof of citizenship or authorization to work per the list on the I-9 Form, which you can find on the above website. In addition, please provide us a copy of your social security card for payroll purposes. Direct Deposit is mandatory and you will need to provide a voided check blank to your supervisor.

The Bureau Human Resources has agreed to pay actual moving expenses and will seek approval through the State Board of Finance within the allowable guidelines. Reimbursement of expenses up to one month's salary or based on the rules established by the Board of Finance, is part of this employment offer. Receipts attached must be for eligible expenses.

If you should terminate your employment prior to six months, you would be required to repay the moving allowances. Attached is the household moving expense form. Please sign the form, and return it to:
Lexi Peters, HR Specialist, Bureau of Human Resources, 500 E Capitol Avenue, Pierre SD 57501, for further processing.

Congratulations on your hire and welcome to the Department of Health. If you have any questions, please contact myself or Lexi Peters in the Human Resource office at (605) 773-4918.

Sincerely,

Susan Isaacson Human Resource Manager

Cc: Heather Perry

	outh Darota
When Application and Authorization sections	Please check one:
are completed, please submit the original to:	
State Board of Finance	State Transfer (SDCL 3-9-9)
Office of Secretary of State	Full-time continuous employment for 6 months. Professional Recruitment (SDC) 2.0.103
Capitol Building 500 E Capitol Ave Pierre SD 575701 Phone: 605-773-3538	
Pierre SD 575701 Phone: 605-773-3538	Attach a written copy of the offer of employment and of payment of moving expenses.
Appl	ication Veteran's Home
Teresa Phillipson	A
Name of Applicant	Deputy Superintedent Vet Affairs New Position Title Agency Employed By
70 ~02	Agency Employed By
12 500 Galashing IL	Hot Socine C T nec
Yearly Salary City, State Moving From	New Post of Duty (City) Tanuary 2019 Expected Month/Year of Move
expenses constitutes fringe benefits excludable from the employee if they had directly paid or incurred these expenses, ((3) if the move is 50 miles or more from the employee's former representation.	d the reimbursement by the State of South Dakota for payment of
Author I hereby certify that the above stated agency ordered the applicant the State of South Dakota. I further declare that to be best of my kn reimbursement of actual household moving expenses are true and compared to the state of the s	to move as indicated and that the move will be for the housest as
(Charle) / 1/. 1	
North of Annie 17 /OCL	Secretar SDD ept of Veterans Affairs Position/ Title of Audiorized Agent
Name of Authorized Agent	Position/ Title of Authorized Agent
Mail 18 ho 16 246	
Signature of Authorized Agent Date	Agency of Authorized Agent Agency of Authorized Agent
Approval by State	Board of Finance
Approved by the State	board of Finance
Board of Finance on	
Signature	of Secretary, State Board of Finance
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Note: When completed, retain one copy in employee personnel file and attach original to voucher to be sent to Auditor Office.



South Dakota Department of Veterans Affairs Michael J. Fitzmaurice State Veterans Home 2500 Minnekahta Ave Hot Springs, SD 57747 Phone 605.745.5547

http://vetaffairs.sd.gov



January 2, 2019

Teresa Phillipson 156 East Mary Street Galesburg, IL 61401

Dear Teresa,

This letter is to confirm your acceptance of employment with the South Dakota State Veterans Home. You have been selected to fill the full-time position of Administrator. Your annual salary will be \$72,500.00. Your benefited hire date with the State of South Dakota will be January 28, 2019. This offer is contingent upon completion of a successful UA screening, background check, and personal reference checks.

You will not be eligible to use your accrued annual (vacation) leave during the first six months of employment. Also, please note that your health insurance coverage will not begin until 1 month and 1 day after your hire date.

In order to comply with the Immigration Reform and Control Act of 1986, you will need to provide documents to verify your eligibility to be employed with the State of South Dakota. You will need to submit the required documents to the Human Resource Office for verification of employment eligibility within three days of beginning employment. Failure to present the required documents may result in you not being able to continue your employment. If you currently do not have your Social Security Card, you will need to apply for a replacement card and bring in proof of your application to receive a duplicate Social Security Card. The Social Security Office will give you a letter verifying that you have requested a new card.

As a condition of employment, you will be required to obtain a TB test at the expense of the State Veterans' Home. Also, for your protection, a voluntary hepatitis B vaccine is recommended. It consists of a series of three injections over six months. Both procedures are provided free of charge at our facility. You also must provide a copy of your immunization records, please bring that record with you on your first day of work.

We're excited to have you join the team and we're looking forward to your arrival. You will receive an on-line orientation packet via email from our Human Resource Specialist, Brian Berger. Please complete all required information prior to your arrival. Please let me know if you have any additional questions or

Sincerely,

Brad Richardson, Superintendent

Brud Calmalan

Accredited Representatives for: American Legion - American Ex-Prisoners of War, Inc. - Blinded Veterans of America - Military Order of Purple Heart -- SD Dept. of Veterans Affairs - The Retired Enlisted Association -- Veterans of Foreign Wars of the U.S.

When Application and A	uthorization sections	Please check one:	
are completed, please sub	mit the original to:	State Transfer (SDCL 3-9-	9)
State Board of Finance		Full-time continuous employn	
Office of Secretary of State		Professional Recruitment (SDCL 3-9-12)
500 E Capitol Ave Pierre SD 57501 Ph	none: 605-773-3537	Attach a written copy of the offer moving expenses.	of employment and of payment of
		tion must be received in the Offic	e of the Secretary of State no
		d of Finance meeting on the th	
		the next Board of Finance meetin	
comply with Bureau of Hu		rotection of personally identifiable in	iformation.
	App	lication	
Scott R. Beeler		Research Scientist II, EMES, Analytical Chemistry	SD School of Mines & Technology
Name of Applicant		New Position Title	Agency Employed By
\$67,196.	St Louis, MO	Rapid City	June, 2019
Yearly Salary	City, State Moving From	New Post of Duty (City)	Expected Month/Year of Move
00504		June 3, 2019	
Bureau of Human Resource	es Class Code	Employment Date with the State	
Dai vaa of Haman Regoure	es class code		
Signature of Applicant		06/04/2019 Date	
W 10 1	Auth	orization	
that the agency ordered the The Agent further declares of actual household moving	applicant to move as indicated, and	vidual is employed in a full-time poll that the move will be for the benefit wledge and belief, the request and au	t of the State of South Dakota.
James M. Rankin		President	
Name of Authorized Agent		Position/ Title of Authorized Age	
4//	- 6-3-19	SD School of Mines	& Technology
Signature of Authorized A	gent Date	Agency of Authorized Agent	
	Approval by Sta	te Board of Finance	
Approved by the State			
Board of Finance on			
$\overline{\mathrm{D}}$	ate Signat	ure of Secretary, State Board of Fina	ince

SCHOOL OF MINES & TECHNOLOGY

OFFICE OF THE PRESIDENT

REVISED

DATE:

May 17, 2019

TO:

Scott R. Beeler

FROM:

James M. Rankin James M. Rawkin

President

-21715B8AE35E43F...

South Dakota School of Mines and Technology

RE:

Appointment with Engineering and Mining Experiment Station,

South Dakota School of Mines & Technology

I am pleased to offer you, subject to approval by the Board of Regents, an appointment as Research Scientist II, Engineering and Mining Experiment Station, Analytical Chemistry in Engineering and Mining Experiment Station, ME9813. The effective date of this appointment is June 3, 2019. Annual appointment dates are June 22 through June 21. Your salary is \$67,196.00 based on 12 months at 100% effort. Dr. Edward F. Duke, Professor/Manager of Analytical Services, is your direct supervisor. As with all employees, you will be evaluated annually.

In addition to your base rate, the approximate value of the benefit package you receive is an additional \$18,331 or 27%. The benefit package includes employer contributions for health, life, worker's compensation, unemployment and PEPL insurance, and matching contributions for social security and retirement. Full-time employees earn 120 hours of vacation time each year (15 days). This vacation allowance is accrued at the rate of 10 hours per month based on a full month of service. According to policy, no vacation leave may be used until you have completed six months of employment. You may accumulate up to a total of 240 hours of vacation time. Once this maximum accumulation is reached, accrual of vacation leave ceases until such time as you make use of part or all of the accumulated time. Full-time employees accrue sick leave at the rate of 9.34 hours per month based on a full month of service. There is no maximum accumulation of sick leave.

The administrative employment offered herein shall be at the pleasure of the Board and may be terminated without notice or cause. The administrative appointment shall commence on June 3, 2019 and shall not extend beyond June 21, 2019. The administrative employment may be renewed at the sole pleasure of the Board. If the Board elects to renew an administrative appointment, it may do so under whatever changed or additional terms and conditions it chooses.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

Your supervisor will review your position description with you when you begin your employment. A written performance and planning review document will be completed by you and your supervisor annually by March 15th.

Scott R. Beeler May 17, 2019 Page Two

The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No. 4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of South Dakota School of Mines & Technology. Withholding statement (W-4) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from your Human Resources Office. Your portion of these forms must be completed on or before your first day of employment. BOR requires direct deposit of payroll checks for all employees. Human Resources will schedule a time for you to complete the necessary new employee paperwork. Enclosed you will find a memo with additional information that you will need to bring. You will also find a General Information form to complete and return with this offer memo.

According to current state regulations (SDCL 3-9-12) concerning moving expenses, we are authorized to reimburse you for the cost of moving your household goods up to one month's salary. However, due to budgetary constraints, we are authorized to reimburse you up to \$800 for your moving costs. We are bound by current state regulations concerning moving expenses. No specific allowance is provided for crating and packing, per se. If you should elect to perform the move using U-Haul or similar rental facilities, you can be reimbursed for expenses up to a maximum of one month's salary (original receipts and gas receipts required). Information on moving expense reimbursement and allowable household moving expenses is included for your information. Per Diem expenses (meals, lodging (original receipts required), mileage, airfare (boarding pass and itinerary required) are reimbursable. Please sign where indicated and return with this offer memo, retaining a copy for your records.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing below. Please return this letter, a signed copy of the enclosed Agreement to Assign Intellectual Property, a signed copy of the Household Moving Allowance form, and the completed General Information form, retaining a copy for your records.

I accept the job offer outlined above.

Scott R. Buler 5/17/2019 | 3:28:04 PM PDT

Signature of Appointee & Date Signed

JR:nlf

Enclosures:

Intellectual Property Agreement

Household Moving Allowance form and information

General Information form

Information needed to complete payroll paperwork

cc:

E Duke J Puszynski **Human Resources** Budget/Payroll Office

When Application an	d Authorization sections	Please check one:	
are completed, please	submit the original to:	State Transfer (SDCL 3-9-9	9)
State Board of Finance	:	Full-time continuous employn	
Office of Secretary of	State	Professional Recruitment (S	SDCL 3-9-12)
500 E Capitol Ave	DI (05 772 2527		of employment and of payment of
Pierre SD 57501	Phone: 605-773-3537 e request and all supporting document	moving expenses.	e of the Secretary of State no
	. CT eight days prior to the Boa		
	ed after that time will be processed a		
comply with Bureau of	f Human Resources policies regarding p Δ pr	protection of personally identifiable in plication	iformation.
		Silvation	
Emily M. Berry		Assistant Director of the Museum of Geology	SD School of Mines & Technology
Name of Applicant		New Position Title	Agency Employed By
\$45,529.40	Kyle, SD	Rapid City	May, 2019
Yearly Salary	City, State Moving From	New Post of Duty (City)	Expected Month/Year of Move
00346		May 28, 2019	
Bureau of Human Reso	ourage Class Code	Employment Date with the State	
DocuSigned by:		5/10/2019 2:33:17 PM P	PDT
Emily M. Burry			וע
Signature of Applicant		Date	
	Auth	orization	
The Agent further decl	Authorized	lividual is employed in a full-time pood that the move will be for the benefit	t of the State of South Dakota.
The Agent further decl	agent hereby certifies that the above ind d the applicant to move as indicated, an lares that, to the best of the Agent's kno oving expenses are true and correct.	lividual is employed in a full-time pood that the move will be for the benefit	t of the State of South Dakota.
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The Agent further decl of actual household mo James M. Ranl Name of Authorized A Docusigned by: James M. Kankin	agent hereby certifies that the above indicated and the applicant to move as indicated, and lares that, to the best of the Agent's knowing expenses are true and correct. Kin Segent 5/10/2019 3:00:41 PM ed Agent Date Approval by Sta	President Position/ Title of Authorized Agency of Authorized Agent	t of the State of South Dakota. thorization for reimbursement



OFFICE OF THE PRESIDENT

DATE:

May 9, 2019

TO:

Emily M. Berry

FROM:

James M. Rankin James M. Ralakila.

President

South Dakota School of Mines and Technology

RE:

Appointment with Museum of Geology,

South Dakota School of Mines & Technology

I am pleased to offer you, subject to approval by the Board of Regents, an appointment as Assistant Director of the Museum of Geology in the Museum of Geology, ME9752. The effective date of this appointment is May 28, 2019. Annual appointment dates are June 22 through June 21. Your salary is \$45,529.40 based on 12 months at 100% effort. Dr. Laurie C. Anderson, Department Head/Professor/Director Museum of Geology, is your direct supervisor. As with all employees, you will be evaluated annually.

In addition to your base rate, the approximate value of the benefit package you receive is an additional \$15,321 or 34%. The benefit package includes employer contributions for health, life, worker's compensation, unemployment and PEPL insurance, and matching contributions for social security and retirement. Full-time employees earn 120 hours of vacation time each year (15 days). This vacation allowance is accrued at the rate of 10 hours per month based on a full month of service. According to policy, no vacation leave may be used until you have completed six months of employment. You may accumulate up to a total of 240 hours of vacation time. Once this maximum accumulation is reached, accrual of vacation leave ceases until such time as you make use of part or all of the accumulated time. Full-time employees accrue sick leave at the rate of 9.34 hours per month based on a full month of service. There is no maximum accumulation of sick leave.

The administrative employment offered herein shall be at the pleasure of the Board and may be terminated without notice or cause. The administrative appointment shall commence on May 28, 2019 and shall not extend beyond June 21, 2019. The administrative employment may be renewed at the sole pleasure of the Board. If the Board elects to renew an administrative appointment, it may do so under whatever changed or additional terms and conditions it chooses.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

Your supervisor will review your position description with you when you begin your employment. A written performance and planning review document will be completed by you and your supervisor annually by March 15th.

Emily M. Berry May 9, 2019 Page Two

The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No. 4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of South Dakota School of Mines & Technology. Withholding statement (W-4) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from your Human Resources Office. Your portion of these forms must be completed on or before your first day of employment. BOR requires direct deposit of payroll checks for all employees. Human Resources will schedule a time for you to complete the necessary new employee paperwork. Enclosed you will find a memo with additional information that you will need to bring. You will also find a General Information form to complete and return with this offer memo.

According to current state regulations (SDCL 3-9-12) concerning moving expenses, we are authorized to reimburse you for the cost of moving your household goods up to one month's salary. No specific allowance is provided for crating and packing, per se. If you should elect to perform the move using U-Haul or similar rental facilities, you can be reimbursed for expenses up to a maximum of one month's salary (original receipts and gas receipts required). Information on moving expense reimbursement and allowable household moving expenses is included for your information. Per Diem expenses (meals, lodging (original receipts required), mileage, airfare (boarding pass and itinerary required) are reimbursable. Please sign where indicated and return with this offer memo, retaining a copy for your records.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing below. Please return this letter, a signed copy of the enclosed Agreement to Assign Intellectual Property, a signed copy of the Household Moving Allowance form, and the completed General Information form, retaining a copy for your records.

I accept the job offer outlined above.

— Docu8igned by:

Emily M. Berry

5/10/2019 | 2:33:17 PM PDT

-C488D21C5B9545E.

Signature of Appointee & Date Signed

JR:nlf

Enclosures:

Intellectual Property Agreement

Household Moving Allowance form and information

General Information form

Information needed to complete payroll paperwork

cc: L Anderson

Provost Office Human Resources Budget/Payroll Office

	e hone: 605-773-3537	Please check one: State Transfer (SDCL 3-9-9-9-9-9-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	nent for 6 months. SDCL 3-9-12) of employment and of payment of
later than 5:00 p.m. C Documentation received a	quest and all supporting documentation Teight days prior to the Board after that time will be processed at the aman Resources policies regarding protection.	of Finance meeting on the the next Board of Finance meeting	ird Tuesday of the month. g. All documentation MUST
	Applic	cation	
Ralph K. Davis		Vice President for Research	SD School of Mines & Technology
Name of Applicant		New Position Title	Agency Employed By
\$217,500	Springdale, AR	Rapid City	July, 2019
Yearly Salary	City, State Moving From	New Post of Duty (City)	Expected Month/Year of Move
00135		July 1, 2019	
Bureau of Human Resource	es Class Code	Employment Date with the State	
—pocusigned by: Kalple & Davis		April 5, 2019	
Signature of Applicant		Date	
	Author	ization	
that the agency ordered the The Agent further declares	at hereby certifies that the above individe applicant to move as indicated, and the that, to the best of the Agent's knowledge expenses are true and correct.	at the move will be for the benefit	of the State of South Dakota.
Name of Authorized Agen		Position/ Title of Authorized Age	ent
ames M. Rankin	4/5/2019 3:48:37 PM MDT	SD School of Mines	& Technology
21 Signatures of Authorized A	agent Date	Agency of Authorized Agent	
Approved by the State	Approval by State	Board of Finance	
Board of Finance on \overline{D}	ate Signature	e of Secretary, State Board of Fina	nce
_		, ,	

Household Moving Allowance 20170701.doc

Note: When completed, retain one copy in employee personnel file and attach original to voucher to be sent to Auditor's Office.

Ralph K. Davis April 5, 2019 Page Two

The administrative employment offered herein shall be at the pleasure of the Board and may be terminated without notice or cause. The administrative appointment shall commence on July 1, 2019 and shall not extend beyond June 21, 2020. The administrative employment may be renewed at the sole pleasure of the Board. If the Board elects to renew an administrative appointment, it may do so under whatever changed or additional terms and conditions it chooses.

If the administrative portion of your employment ceases and you hold tenure, your responsibilities would transition from administrative to faculty-only. In that circumstance, your contract level of effort would move from 12 months to 9 months and compensation would be adjusted to 9/12 of the 12-month administrative salary at the time of transition.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No. 4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of South Dakota School of Mines & Technology. Withholding statement (W-4) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from your Human Resources Office. Your portion of these forms must be completed on or before your first day of employment. BOR requires direct deposit of payroll checks for all employees. Human Resources will schedule a time for you to complete the necessary new employee paperwork. Enclosed you will find a memo with additional information that you will need to bring. You will also find a General Information form to complete and return with this offer memo.

According to current state regulations (SDCL 3-9-12) concerning moving expenses, we are authorized to reimburse you for the cost of moving your household goods up to one month's salary. No specific allowance is provided for crating and packing, per se. If you should elect to perform the move using U-Haul or similar rental facilities, you can be reimbursed for expenses up to a maximum of one month's salary (original receipts and gas receipts required). Information on moving expense reimbursement and allowable household moving expenses is included for your information. Per Diem expenses (meals, lodging (original receipts required), mileage, airfare (boarding pass and itinerary required) are reimbursable. Please sign where indicated and return with this offer memo, retaining a copy for your records.

Ralph K. Davis April 5, 2019 Page Three

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing below. Please return this letter, a signed copy of the enclosed Agreement to Assign Intellectual Property, a signed copy of the Household Moving Allowance form, and the completed General Information form no later than 20 days from the date of this memo, retaining a copy for your records.

I accept the job offer outlined above.

Ralph tr. Davis

4/10/2019 | 7:59:30 AM PDT

Signature of Appointee & Date Signed

JR:nlf

Enclosures: Intellectual Property Agreement

Household Moving Allowance form and information

General Information form

Information needed to complete payroll paperwork

C Cox cc:

When Application and Arare completed, please sub State Board of Finance	omit the original to:	Please check one: State Transfer (SDCL 3-9-Full-time continuous employments)	ment for 6 months.
Office of Secretary of State 500 E Capitol Ave		Professional Recruitment (Attach a written copy of the offer	SDCL 3-9-12) of employment and of payment of
Pierre SD 57501 Pl	none: 605-773-3537	moving expenses.	
	F	Application	0404
Abdallah M. Bada	ıhdah	Associate Professor	XII SU
Name of Applicant		New Position Title	Agency Employed By
\$83,586	Doha, Qatar	Brookings	August 2018
Yearly Salary	City, State Moving From	New Post of Duty (City) 08-22-2018	Expected Month/Year of Move
Bureau of Human Resource	es Class Code	Employment Date with the State	
A commence of the commence of		5-9-2019	
Signature of Applicant		Date	
that the agency ordered the The Agent further declares	at hereby certifies that the above applicant to move as indicated that, to the best of the Agent's green expenses are true and correct the true and correct that the above as the true and correct that the above applicant to move a sindicated that the above applicant to move a sindicated that the above applicant to move a sindicated that the above applicant to move as indicated that the above applicant to the best of the Agent's applicant to the applicant to t	e individual is employed in a full-time poid, and that the move will be for the benefic knowledge and belief, the request and an analysis of Position/Title of Authorized Agency of Authorized Agent	it of the State of South Dakota.
	Approval by	State Board of Finance	
Approved by the State Board of Finance on		lignature of Secretary, State Board of Fin	



College of Arts and Sciences

Department of Sociology and Rural Studies

Hansen Hall 004, Box 670A South Dakota State University Brookings, SD 57007-1296 Phone 605-688-4132

MEMORANDUM

DATE:

April 19, 2018

TO:

Abdallah Badahdah

FROM:

Mary Emery, Department Head for Sociology and Rural Studies

South Dakota State University

RE:

Appointment with Department of Sociology and Rural Studies, South Dakota

State University

I am pleased to offer you, subject to approval by the Board of Regents, an appointment as an Associate Professor with a recommendation for Tenure in the Department of Sociology and Rural Studies Department. Tenure is dependent on BOR approval. The effective date of this appointment is August 22, 2018. Faculty are required to report on August 13 (5 working days before classes begin). Annual appointment dates are August 22nd through May 21st Your salary is \$83,586 based on 9 months at 100% time. Dr. Mary Emery is your direct supervisor. As with all employees, you will be evaluated annually. This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

You are required to provide an official transcript for your highest degree within 30 days of accepting this position. The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No. 4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records. In addition to the intellectual properties, also enclosed is a conflict of interest form, please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of South Dakota State University. This offer is contingent on the university's verification of credentials and other information required by law and/or university policies, including but not Page 2

limited to a criminal background check. Withholding statements (W-4's) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from the Payroll Office (Morrill Hall Rm 306). Your portion of these forms must be completed on or before your first day of employment. BOR requires direct deposit of payroll checks for all employees.

As an Associate Professor, your position is eligible for state benefits to include household moving allowance of up to \$5000 as outlined in SDCL 3-9-12.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing below and returning this letter, a signed copy of the enclosed agreement to assign Intellectual Property, and the Conflict of Interest Form to my attention no later than May 1, 2018, retaining a copy for your records.

cc: Jason Zimmerman, Interim Dean of the College of Arts and Sciences
Human Resources

Taccept the job offer outlined above

Signature of Appointee

Encl: Intellectual Property Policy

Intellectual Property Form Conflict of Interest Form

Expectations of Employment Document Departmental Standards Document

When Application and Authorization sections	Please check one:	
are completed, please submit the original to:	State Transfer (SDCL 3-9-9)	
State Board of Finance	Full-time continuous employme	
Office of Secretary of State	Professional Recruitment (S	DCL 3-9-12)
500 E Capitol Ave Pierre SD 57501 Phone: 605-773-3537	Attach a written copy of the offer o moving expenses.	employment and of payment of
PLEASE NOTE: The request and all supporting documentati	on must be received in the Office	of the Secretary of State no
leter then 5:00 nm CT eight days prior to the Board	of Finance meeting on the to	AQ 1 derora of the practic
Documentation received after that time will be processed at t comply with Bureau of Human Resources policies regarding pro	ne next Board of Finance meeting tection of personally identifiable in	formation.
	cation	
••	Education Coordinator	Spar-
Sarah Jacobs		Agency Employed By
Name of Applicant	New Position Title	Agency-employed by
\$42,870 Lakefeld .MD	Brookings, SD	Feb. 299
Yearly Salary City, State Moving From	New Post of Duty (City)	Expected Month/Year of Move
~2(0)	January 7, 2019	
Bureau of Human Resources Class Code	Employment Date with the State	
Bureau of Human Resources Class Code		
household moving expenses. Signature of Applicant	S115/19	
Autho	orization	
The undersigned agent hereby certifies that the above indi- that the agency ordered the applicant to move as indicated, and The Agent further declares that, to the best of the Agent's know of actual household moving expenses are true and correct.	that the move will be for the benefi	it of the State of South Dakota.
Gwen McCausland	Awector	
Name tight athorized Agent	Position/ Title of Authorized Ag	ent
Busen McCausland 5/17/2019 09:	38/ERILL) South Dakita Ac	gricultural Heritage Museum
Signature of Authorized Agent Date	Agency of Authorized Agent)
Signature of Authorized Agen.		
Approval by Sta	te Board of Finance	
Approved by the State		
Board of Finance on		ance
Board of Finance on	ure of Secretary, State Board of Fin	ance

MEMORANDUM

DATE:

December 17, 2018

TO:

Sarah Jacobs

FROM:

Gwen McCausland, Director of the Agricultural Heritage Museum

South Dakota State University

RE:

Revised appointment with Agricultural Heritage Museum, South Dakota State

University

I am pleased to offer you, subject to approval by the President, an appointment as Education Coordinator in the South Dakota Agricultural Heritage Museum. The effective date of this appointment is January 7, 2019. Annual appointment dates are June 22 to June 21. Your salary is \$42,870 based on 12 months at 100% time. Gwen McCausland is your direct supervisor. As with all employees, you will be evaluated annually.

As of today's date, this position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

You are required to provide an official transcript for your highest degree within 30 days of accepting this position. The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No. 4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records. In addition to the intellectual properties, also enclosed is a conflict of interest form, please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of South Dakota State University. This offer is contingent on the university's verification of credentials and other information required by law and/or university policies, including but not limited to a criminal background check. Withholding statements (W-4's) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from the Payroll Office (Morrill Hall/Administration Building Rm 306). Your portion of these forms must be completed on or before your first day of employment. BOR requires direct deposit of payroll checks for all employees.



As Education Coordinator, your position is eligible for state benefits to include household moving allowance of \$500) as outlined in SDCL 3-9-12.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing below and returning this letter, a signed copy of the enclosed agreement to assign Intellectual Property, and the Conflict of Interest Form to my attention no later than January 8, 2019, retaining a copy for your records.

cc:

Gwen McCausland Human Resources

I accept the job offer outlined above.

12/17/2018 | 18:07 PST

Signature of Appointee & Date Signed

Encl: Intellectual Property Policy

Intellectual Property Form Conflict of Interest Form

When Application and Authorization sections	Please check one:	
are completed, please submit the original to:	State Transfer (SDCL 3-9-9))
State Board of Finance	Full-time continuous employm	ent for 6 months.
Office of Secretary of State	Professional Recruitment (S	
500 E Capitol Ave Pierre SD 57501 Phone: 605-773-3537	Attach a written copy of the offer of	of employment and of payment of
Pierre SD 57501 Phone: 605-773-3537 PLEASE NOTE: The request and all supporting documentation	moving expenses.	of the Secretary of State no
later than 5:00 p.m. CT eight days prior to the Board		
Documentation received after that time will be processed at the		
comply with Bureau of Human Resources policies regarding pro-	ection of personally identifiable in	formation.
Appli	cation	
Tim Tanner	4-H Program Director	SDSU Extension
Name of Applicant	New Position Title	Agency Employed By
\$87,000 Jewett, Ohio	Brookings, SD	August, 2019
Yearly Salary City, State Moving From	New Post of Duty (City)	Expected Month/Year of Move
m2/19	August 19, 2019	
Bureau of Human Resources Class Code	Employment Date with the State	
Bureau of Human Resources Class Code		
household moving expenses.		
household moving expenses.		
household moving expenses.	<u> </u>	
Nousehold moving expenses. Signature of Applicant	<u> </u>	
Signature of Applicant Author	Date	
Signature of Applicant	Date ization dual is employed in a full-time postat the move will be for the benefit	of the State of South Dakota.
Signature of Applicant Author The undersigned agent hereby certifies that the above indivithat the agency ordered the applicant to move as indicated, and the Agent further declares that, to the best of the Agent's knowled of actual household moving expenses are true and correct.	Date ization dual is employed in a full-time postat the move will be for the benefit edge and belief, the request and au	of the State of South Dakota.
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Signature of Applicant Author X The undersigned agent hereby certifies that the above indivithat the agency ordered the applicant to move as indicated, and to the Agent further declares that, to the best of the Agent's knowled of actual household moving expenses are true and correct. Name of Authorized Agent	Date ization dual is employed in a full-time post the move will be for the benefit edge and belief, the request and au Position/ Title of Authorized Age	tof the State of South Dakota. thorization for reimbursement
Signature of Applicant Author X The undersigned agent hereby certifies that the above indivithat the agency ordered the applicant to move as indicated, and to the Agent further declares that, to the best of the Agent's knowled of actual household moving expenses are true and correct. Yarla Vautnan Name of Authorized Agent Tautnan Name of Authorized Agent	Date ization dual is employed in a full-time post the move will be for the benefit edge and belief, the request and au Position/ Title of Authorized Age SOSU Extens	tof the State of South Dakota. thorization for reimbursement
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Signature of Applicant Author Author The undersigned agent hereby certifies that the above indivithat the agency ordered the applicant to move as indicated, and the Agent further declares that, to the best of the Agent's knowled factual household moving expenses are true and correct. Harla Irautnan Name of Authorized Agent Trautnan Signature of Authorized Agent Date	Date ization dual is employed in a full-time post the move will be for the benefit edge and belief, the request and au Position/ Title of Authorized Age SOSU Extens	tof the State of South Dakota. thorization for reimbursement
Signature of Applicant Author Author The undersigned agent hereby certifies that the above indivithat the agency ordered the applicant to move as indicated, and the Agent further declares that, to the best of the Agent's knowled factual household moving expenses are true and correct. Harla Irautnan Name of Authorized Agent Trautnan Signature of Authorized Agent Date	Date ization dual is employed in a full-time post the move will be for the benefit edge and belief, the request and au Position/ Title of Authorized Age SOSU Extens Agency of Authorized Agent	tof the State of South Dakota. thorization for reimbursement
Signature of Applicant Author The undersigned agent hereby certifies that the above indivithat the agency ordered the applicant to move as indicated, and to the Agent further declares that, to the best of the Agent's knowled factual household moving expenses are true and correct. Name of Authorized Agent Name of Authorized Agent Approval by State Approved by the State Board of Finance on	Date ization dual is employed in a full-time post the move will be for the benefit edge and belief, the request and au Position/ Title of Authorized Age SOSU Extens Agency of Authorized Agent	tof the State of South Dakota. thorization for reimbursement



South Dakota State University
154 Berg Agricultural Hall (SAG), Box 2207D
Brookings, SD 57007

№ 605-688-4792

DATE:

4/26/19

TO:

Dr. Tim Tanner

FROM:

Karla Trautman, Interim Director

South Dakota State University

RE:

Appointment with SDSU Extension, South Dakota State University

I am pleased to offer you, subject to approval by the President, an appointment as the State 4-H Program Director with SDSU Extension. The effective date of this appointment is August 19, 2019. Annual appointment dates are June 22nd to June 21st of the following year. Your salary is \$87,000 based on 12 months at 100% time. Karla Trautman, Interim Director of SDSU Extension, is your direct supervisor. As with all employees, you will be evaluated annually.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

You are required to provide an official transcript for your highest degree within 30 days of accepting this position. The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No. 4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records. In addition to the intellectual properties, also enclosed is a conflict of interest form, please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of South Dakota State University. This offer is contingent on the university's verification of credentials and other information required by law and/or university policies, including but not limited to a criminal background check. Withholding statements (W-4's) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from your Payroll Office. Your portion of these forms must be completed on or before your first day of employment. BOR requires direct deposit of payroll checks for all employees.

As the State 4-H Program Director, your position is eligible for state benefits to include household moving allowance of up to 1 month salary as outlined in SDCL 3-9-12. The moving allowance forms are included and should be returned with signature with the intellectual property and conflict of interest forms.

SOUTH DAKOTA STATE UNIVERSITY®



If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing below and returning this letter, a signed copy of the enclosed agreement to assign intellectual Property, the Conflict of Interest Form and the Household Moving Allowance form to my attention no later than May 24th, retaining a copy for your records.

cc:

Karla Trautman

I accept the job offer outlined above.

Signature of Appointee

Encl: Intellectual Property Policy

Intellectual Property Form Conflict of Interest Form Moving Allowance Forms

State Transfer (SDCL 3-9-9) State Board of Finance Office of Secretary of State South Dad of Finance Office of Secretary of State South Early of Finance Office of Secretary of State South Early of New Points (SDCL 3-9-12) Anch a writen copy of the office of employment for 6 months. Professional Recruitment (SDCL 3-9-12) Anch a writen copy of the office of employment and of payment of months groups. Professional Recruitment (SDCL 3-9-12) Anch a writen copy of the office of employment and of payment of months groups. Professional Recruitment (SDCL 3-9-12) Anch a writen copy of the office of employment and of payment of months groups. Professional Recruitment (SDCL 3-9-12) Anch a writen copy of the office of employment and of payment of months groups. Professional Recruitment (SDCL 3-9-12) Anch a writen copy of the office of employment and of payment of months groups. Professional Recruitment (SDCL 3-9-12) Anch a writen copy of the office of employment and of payment of months groups. Professional Recruitment (SDCL 3-9-12) Anch a writen copy of the office of employment and payment of months groups. Professional Recruitment (SDCL 3-9-12) Anch a writen copy of the office of employment of months groups. Professional Recruitment (SDCL 3-9-12) Anch a writen copy of the office of employment of months groups. Professional Recruitment (SDCL 3-9-12) Anch a writen copy of the office of employment of months groups. Professional Recruitment (SDCL 3-9-12) Anch a writen copy of the office of employment of months groups. Professional Recruitment (SDCL 3-9-12) Anch a writen copy of the office of the based of Finance Professional Recruitment (SDCL 3-9-12) Anch a writen copy of the office of the based of Finance Professional Recruitment (SDCL 3-9-12) Anch a writen copy of Authorized Agent Professional Recruitment (SDCL 3-9-12) Anch a writen copy of Authorized Agent Professional Recruitment (SDCL 3-9-12) Anch a manufacture of the copy of Authorized Agent Professional Recruitment (SDCL 3-9-12) Anch and the months and	When Application and	i Authorization sections	Please check one:	
Office of Secretary of State 300 E Capilo Ave Pierre SD 37301 Phone: 605-773-3537 PLEASE NOTE: The request and all supporting documentation must be received in the Office of imployment and of payment of moving appendix. PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5100 p.m. CT eight days prior to the Board of Flaance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information. Application Xufei Yang Sure of Applicant Sas 2.95 Butte, MT Yearly Salary City, State Moving From City, State Moving From Employment Date with the State Bureau of Human Resources Class Code Fundamentation Title Bureau of Human Resources Class Code Bureau of Human Resources Class Code The whole of the Secretary of Move 6/22/19 Employment Date with the State Authorization Approval by State Board of Finance Approved by the State Approved by the State Approved by State Board of Finance Approved by the State Approved by State Board of Finance Approved by the State Approved by t	* *		State Transfer (SDCL 3-9-9)
Auch a written copy of the offer of employment and of payment of moving expenses. PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5100 p.m., CT clight days prior to the Board of Finance meeting on the third Twenday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information. Application Xuffei Yang Name of Applicant Sa3.295 Butte, MT Brookings Sobu New Position Title Bureau of Human Resources Class Code I hereby request authorization and approval to submit a voucher for reimbursement of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses are true and correct. Authorization Authorization Authorization Authorization Authorization Authorization Authorization Authorization and approval to submit a voucher for reimbursement of actual household moving expenses are true and correct. Authorization Authorization Authorization Authorization and approval to submit a voucher for reimbursement of actual household moving expenses are true and correct. Authorization Authorization Authorization Authorization Authorization and approval by State Board of Finance Agency of Authorized Agent	State Board of Finance		Full-time continuous employm	ent for 6 months.
Pierce SD 37501 Phone: 603-773-3337 moving expenses PIEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State so later than 500 nm. CT clight days prior to the Board of Finance meeting on the filter traday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information. Application Xuffei Yang Name of Applicant SB3,295 Butte, MT City, State Moving From City, State Moving From Percent County (City) G/22/19 Employment Date with the State I hereby request authorization and approval to submit a voucher for reimbursement of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses. Authorization Authorization for reimbursement of actual household moving expenses are true and correct. Authorization Approval by State Board of Finance	•	tate		
PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 n.m. CT eight days prior to the Board of Flanance meeting. All the shirt Tready of the month to be processed at the next Board of Flanance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information. Application Xuffei Yang New Position Title Agency Employed By		Phone: 605 772 2527		of employment and of payment of
Signature of Authorized Agent Date				of the Secretary of State no
Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information. Application Xufei Yang Solution Application Approved by Solution Application Approved by Solution Application Approved by Solution Approved Solution Approve	ister than 5:00 n.m.	CT eight days prior to the Board	of Finance meeting on the th	ird Tuesday of the month.
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Nuffei Yang Name of Applicant \$83,295 Butte, MT City, State Moving From 6/22/19 Bureau of Human Resources Class Code 1 hereby request authorization and approval to submit a voucher for reimbursement of actual household moving expenses subject to the limitations established by South Dukota law. I shall attach to said voucher evidence of actual household moving expenses. Signature of Approval agent hereby certifies that the above individual is employed in a full-time position with the above agency, that the agency ordered the applicant to move as indicated, and that the move will be for the benefit of the State of South Dukota. The Agent further declares that, to the best of the Agent's knowledge and belief, the request and authorization for reimbursement of actual household moving expenses are true and correct. Agency Employed By	comply with Bureau of	Human Resources policies regarding pro	tection of personally identifiable in	formation.
Name of Applicant \$83,295 Butte, MT City, State Moving From Brookings New Position Title Brookings Superior Duty (City)		Appli	cation	
Searcy Salary City, State Moving From New Post of Duty (City) Expected Month/Year of Move	Xufei Yang		Environment Quality Engineer/Assistant Professor	SDSU
New Post of Duty (City) Expected Month/Year of Move 6/22/19	Name of Applicant		New Position Title	Agency Employed By
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Expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses. Decusioned by: Signature of Applicant Signature of Authorized Agent Date	Bureau of Human Reso	urces Class Code	Employment Date with the state	
Authorization Authorization	Carrill		5/20/2010 15:52 PPT	
Authorization X The undersigned agent hereby certifies that the above individual is employed in a full-time position with the above agency, that the agency ordered the applicant to move as indicated, and that the move will be for the benefit of the State of South Dakota. The Agent further declares that, to the best of the Agent's knowledge and belief, the request and authorization for reimbursement of actual household moving expenses are true and correct. Van C. Position/ Title of Authorized Agent Date South Dakota	į ' ' /			
The undersigned agent hereby certifies that the above individual is employed in a full-time position with the above agency, that the agency ordered the applicant to move as indicated, and that the move will be for the benefit of the State of South Dakota. The Agent further declares that, to the best of the Agent's knowledge and belief, the request and authorization for reimburse ment of actual household moving expenses are true and correct. Van C. Agricultural Biosyskms Engineering Dept.	Signature of Applicant		Date	
that the agency ordered the applicant to move as indicated, and that the move will be for the benefit of the State of South Dakota. The Agent further declares that, to the best of the Agent's knowledge and belief, the request and authorization for reimbursement of actual household moving expenses are true and correct. Van C.		Autho	rization	
Signature of Authorized Agent Date S D S U Approval by State Board of Finance Approved by the State Board of Finance on	that the agency ordered The Agent further decl	I the applicant to move as indicated, and t ares that, to the best of the Agent's knowle	hat the move will be for the benefit	of the State of South Dakota.
Signature of Authorized Agent Date SDSU Agency of Authorized Agent Approval by State Board of Finance Approved by the State Board of Finance on	Van C.	Kelley	Agricultural & Bios	Istems Engineering Dept. Head
Signature of Authorized Agent Date Agency of Authorized Agent Approval by State Board of Finance Approved by the State Board of Finance on	Name of Authorized A			
Approval by State Board of Finance Approved by the State Board of Finance on	- Van	July 5-50-19		
Approved by the State Board of Finance on	Signature of Authorize	ed Agent / Date	Agency of Audionzea Agent	
Board of Finance on		Approval by State	Board of Finance	
Board of Finance on	Approved by the State			
Date Signature of Secretary, State Board of Finance			66 - B 1 67	
		Date Signatur	re of Secretary, State Board of Fina	nice



SOUTH DAKOTA STATE UNIVERSITY

Department of Agricultural & Biosystems Engineering

DATE:

May 1, 2019

TO:

Xufei Yang

FROM:

Van C. Kelley, Department Head South Dakota State University

RE:

Appointment with Agricultural and Biosystems Engineering, South Dakota State University

I am pleased to offer you, subject to approval by the Board of Regents, an appointment as Assistant Professor in the Agricultural and Biosystems Engineering Department. The effective date of this appointment is August 22, 2019. Annual appointment dates are August 22nd through May 21st. Your salary is \$83,295 based on 9 months at 100% time. I will be your direct supervisor. As with all employees, you will be evaluated annually.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

You are required to provide an official transcript for your highest degree within 30 days of accepting this position. The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No. 4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records. In addition to the intellectual properties, also enclosed is a conflict of interest form, please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of South Dakota State University. This offer is contingent on the university's verification of credentials and other information required by law and/or university policies, including but not limited to a criminal background check. Withholding statements (W-4's) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from your Payroll Office. Your portion of these forms must be completed on or before your first day of employment. BOR requires direct deposit of payroll checks for all employees.

As an Assistant Professor, your position is eligible for state benefits to include household moving allowance of up to 1-month salary as outlined in SDCL 3-9-12.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing below and returning this letter to my attention no later than May 15, 2019, retaining a copy for your records.

cc:

Human Resources

I accept the job offer outlined above.

Xuri Yang

5/1/2019 | 15:20 PDT

SigHature of Appointee & Date Signed

Fncl:

College/Departmental Expectations Document

later than 5:00 p.m. CT eight days prior Documentation received after that time will b	Please check one: State Transfer (SDCL 3-Full-time continuous employmentation) must be received in the Office processed at the next Board of Finance meeting on the steep regarding protection of personally identifiable Application	oyment for 6 months. It (SDCL 3-9-12) If of employment and of payment of If ce of the Secretary of State no third Tuesday of the month Sting All documentation MUST
Jordan Bonstrom	Dir. SRR	USD
Name of Applicant	New Position Title	Agency Employed By
51,000 Stillwater, Ol	K Vermillion, SD	May 2019
Yearly Salary City, State Movin	-	Expected Month/Year of Move
00 345	5/13/2019	_
Bureau of Human Resources Class Code	Employment Date with the State	e
Signature of Applicant	5123/19 Date	
Signature of Applicant	5/23/19 Date Authorization	
The undersigned agent hereby certifies that the agency ordered the applicant to move a	at the above individual is employed in a full-time is indicated, and that the move will be for the ben the Agent's knowledge and belief, the request and	nefit of the State of South Dakota.
The undersigned agent hereby certifies that the agency ordered the applicant to move at The Agent further declares that, to the best of the	at the above individual is employed in a full-time is indicated, and that the move will be for the benche Agent's knowledge and belief, the request and and correct. Assistant Vice President	nefit of the State of South Dakota. I authorization for reimbursement dent, Human Resources
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MEMORANDUM

DATE:	April 1, 2019			
TO:	Jordan Bonstrom			
FROM:	Carl Gutzman	Human Resources Generalist	_, University of South Dakota _, University of South Dakota	
RE:	Appointment with Student	Services		
I am pleased to appointment are:		al by the Board of Regents, a non-fa	culty exempt appointment. Details of the	
•	Title: Director of Stude	ent Rights and Responsibilitie	S	
Departi	ment: Student Services			
Effective	Date: May 13, 2019			
Annual Sa	alary: \$51,000.00			
Appointment Mo	onths: 12			
Appointment Pe	ercent: 100			

This offer is contingent on the favorable results of a background check. Other special conditions that apply: Current contract ends with fiscal year of June 21, 2019. It is our intent to issue a subsequent fiscal year contract under the same terms.

Your position is eligible for state benefits to include household moving allowance of up to 1 month salary as outlined in SDCL 3-9-12. The University of South Dakota will provide up to \$4,250.00 in moving expenses. Reimbursed moving expenses are considered taxable income.

The administrative appointment shall commence on May 13, 2019 and shall not extend beyond June 21, 2019. The administrative employment may be renewed at the sole pleasure of the Board. If the Board elects to renew an administrative employment offered herein shall be at the pleasure of the Board and may be terminated without notice or cause.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

The University, in accordance with annual salary policy approved by the state legislature, the Board of Regents compensation policies, your performance, and institutional priorities, will determine any future annual pay increases. Payroll dates begin on the 22nd of the month through the 21st with payroll on the last day of the month. Eligible leave will be accrued in accordance with your appointment and all employees are required to request leave through the payroll system to ensure leave is recorded accurately. Benefits are administered through the State of South Dakota and are provided to any employee that is in a regular position that is employed at 50% or greater time.

The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No. 4:34. Please review the policy, sign the form and return with this offer memo.

You are also required to complete the attached conflict of interest form pursuant to South Dakota Board of Regents Conflict of Interest, Board Policy No. 4:35.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of University of South Dakota. Withholding statements (W-4's) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from your Human Resources Office. Your portion of these forms must be completed on or before your first day of employment. BOR requires direct deposit of payroll checks for all employees.

You are scheduled to attend orientation sessions for new employees. All sessions are held in 104 Slagle Hall at the indicated date and times. (NOTE: Sioux Falls and remote employees will be scheduled for one-on-one sessions).

- General Information and Benefits Overview, 8:15 a.m. on Wednesday, May 15
- Guidelines for Using and Reporting Leave, 8:15 a.m. on wednesday, June 12
- Anti-Harassment and Discrimination, 9:00 a.m. on Wednesday, May 29

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing below and returning this letter and supporting documents no later than April 5, 2019, retaining a copy for your records.

I accept the job offer outlined above.

DocuSigned by: Jordan Bonstrom

4/1/2019

____95F690E1BBF647A... Signature of Appointee & Date Signed

Encl:

Intellectual Property Form Employee Personal Data Sheet Conflict of Interest Form

I-9 and W-4

When Application and Authorization sections	Please check one:	
are completed, please submit the original to:	State Transfer (SDCL 3-9-9)	
State Board of Finance	Full-time continuous employment for 6 months.	
Office of Secretary of State	Professional Recruitment (SDCL 3-9-12) Attach a written copy of the offer of employment and of payment of	
500 E Capitol Ave Pierre SD 57501 Phone: 605-773-3537	Mitach a written copy of the offer of moving expenses.	of employment and of payment of
DUE ACE NOTE: The sequest and all comporting documents	ation must be received in the Office	e of the Secretary of State no
later than 5:00 p.m. CT eight days prior to the Boar Documentation received after that time will be processed a comply with Bureau of Human Resources policies regarding p	rd of Finance meeting on the In I the next Board of Finance meetin	g. All documentation MUST
App	olication	
Meiying Hua	Asst. Prof. Accounting	USD - Vermillion
Name of Applicant	New Position Title	Agency Employed By
\$115.000 w/o PhO \$125.000 w/ PhD Ravenna, OH	Vermillion	August 22, 2019
Yearly Salary City, State Moving From	New Post of Duty (City)	Expected Month/Year of Move
00800	August 22, 2019	
OU OU	Employment Date with the State	
Bureau of Human Resources Class Code		
nousehold moving expenses.		
	4/22/201	
household moving expenses.		
Signature of Applicant	4/22/201	
Signature of Applicant	A/22/2019 Date Torization dividual is employed in a full-time point that the move will be for the benefit	osition with the above agency, it of the State of South Dakota.
Signature of Applicant Authorithat the agency ordered the applicant to move as indicated, and The Agent further declares that, to the best of the Agent's known of actual household moving expenses are true and correct.	Date Date norization dividual is employed in a full-time pond that the move will be for the benefit owledge and belief, the request and at	esition with the above agency, it of the State of South Dakota. authorization for reimbursement
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Signature of Applicant Auth The undersigned agent hereby certifies that the above incentive that the agency ordered the applicant to move as indicated, and The Agent further declares that, to the best of the Agent's known of actual household moving expenses are true and correct. Emery Wasley Name of Authorized Agent	Date Date norization dividual is employed in a full-time point that the move will be for the benefit owledge and belief, the request and at Assistant Vice Preside Position/ Title of Authorized Age	esition with the above agency, it of the State of South Dakota. authorization for reimbursement ent, Human Resources gent
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Signature of Applicant Auth The undersigned agent hereby certifies that the above incertifies that the agency ordered the applicant to move as indicated, and The Agent further declares that, to the best of the Agent's knot of actual household moving expenses are true and correct. Emery Wasley Name of Authorized Agent Signature of Authorized Agent Approved by the State Roard of Finance on	Date	psition with the above agency, it of the State of South Dakota. athorization for reimbursement ent, Human Resources gent



MEMORANDUM

DATE:

October 22, 2018

TO:

Meiying Hua

FROM:

Dr. Venky Venkatachalam, Dean of the Beacom School of Business, University of South Dakota

RE: Appointment with Beacom School of Business, University of South Dakota

I am pleased to offer you, subject to approval by the Board of Regents, a tenure-track appointment as an Assistant Professor of Accounting in the Beacom School of Business. The effective date of this appointment is August 22, 2019. Contingent on the completion of a Ph.D. prior to August 22, 2019, your annual salary will be \$125,000.00. If you have not completed your Ph.D. by August 22, 2019, your annual salary will be \$115,000.00 until such time you complete your Ph.D. at which time your salary will be adjusted to \$125,000.00 starting the following pay period. Annual appointment dates are August 22 to May 21 for 9 months at 100%. As with all faculty, you will be evaluated annually. This offer is contingent on the favorable results of a background check.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

You are required to provide an official transcript for your highest degree within 30 days of accepting this position. The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No.4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records. In addition to the intellectual properties, also enclosed is a conflict of interest form, please review the policy, sign where indicated and return with this this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of the University of South Dakota. Withholding statements (W-4's) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from your Human Resources Office. Your portion of these forms must be completed on or before your first day of employment. The Board of Regents requires direct deposit of payroll checks for all employees.

In addition, with the final provision of the Immigration Act of 1990, Public Law No. 101-649, effective October 1, 1991, Section 214.2 (h) (6) (vi) (E), the Beacom School of Business will comply with the directives of the law until the end of your authorized employment under the H-1B status.

Your position is eligible for state benefits to include household moving allowance of up to 1 month salary as outlined in SDCL 3-9-12. The University of South Dakota will provide up to \$8,000.00 reimbursable for moving expenses in compliance with BOR policies and procedures.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing below and returning this letter and a signed copy of the enclosed agreement to assign Intellectual Property and Conflict of Interest Form no later than October 24, 2018 retaining a copy for your records. Send the signed documents to:

Kimberley Andres
Beacom School of Business
University of South Dakota
414 E. Clark Street
Vermillion, SD 57069

Enol: (7)
Agreement to Assign Intellectual Property Rights
Confidentiality Statement
Conflict of Interest
Direct Deposit
Personal Data Statement
I-9
W-4

co: Dr. Kurt Hackemer, Interim Provost
Carl Gutzman, USD Human Resources
Kimberley Andres, Beacom School of Business payroll representative

PLEASE NOTE: The relater than 5:00 p.m. C Documentation received comply with Bureau of He	bmit the original to: te thone: 605-773-3537 equest and all supporting documentate T eight days prior to the Board after that time will be processed at tuman Resources policies regarding pro-	moving expenses. ion must be received in the Office of Finance meeting on the the next Board of Finance meetin otection of personally identifiable in ication	nent for 6 months. SDCL 3-9-12) of employment and of payment of e of the Secretary of State no uird Tuesday of the month, g. All documentation MUST information.
Ranjeet John		Assistant Professor	University of South Dakota
Name of Applicant		New Position Title	Agency Employed By
\$80,000	Stillwater, Oklahoma	Vermillion, SD	06/2019
Yearly Salary	City, State Moving From	New Post of Duty (City)	Expected Month/Year of Move
15 0080	0	08/22/2019	
Bureau of Human Resource		Employment Date with the State	
Signature of Applicant	<i>5</i>	05 23 1	19
	Autho	orization	
that the agency ordered the The Agent further declare	nt hereby certifies that the above individe applicant to move as indicated, and as that, to the best of the Agent's knowing expenses are true and correct.	that the move will be for the benefi	t of the State of South Dakota.
Emery Wasley		Assistant Vice President, Human Resources	
Name of Authorized Agent Signature of Authorized Agent Date		Position/ Title of Authorized Agent	
		University of South Dakota	
		Agency of Authorized Agent	
	Approval by Stat	e Board of Finance	
Approved by the State	11		
Board of Finance on _			
Ī	Date Signatu	ire of Secretary, State Board of Fin	ance



MEMORANDUM

DATE:

January 16, 2019

TO:

Ranjeet John

FROM:

Michael Kruper Michael Kruger, Dean, College of Arts and Sciences

RE:

Appointment with the Department of Biology, College of Arts and Sciences

l am pleased to offer you, subject to approval by the Board of Regents, an appointment as Assistant Professor of Ecological Modeling in the Department of Biology. The effective date of this appointment is August 22, 2019. Annual appointment dates are August 22"d through May 21". Your salary is \$80,000 based on nine months at 100% time. Kaius Helenurm is your direct supervisor. As with all employees, you will be evaluated annually. This offer is contingent on the favorable results of a background check.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

You are required to provide an official transcript for your highest degree within 30 days of accepting this position. The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No. 4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records. In addition to the intellectual properties form, also enclosed is a conflict of interest form. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of the University of South Dakota. Withholding statements (W-4's) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (1-9) are available from your Human Resources Office. Your portion of these forms must be completed on or before your first day of employment. The Board of Regents requires direct deposit of payroll checks for all employees.

As an Assistant Professor, your position is eligible for state benefits. Your position is eligible for state benefits to include household moving allowance of up to 1 month salary as outlined in SDCL 3-9-12. The University of South Dakota will provide up to \$2,500 in moving expenses. Reimbursed moving expenses are considered taxable income. Once paid, Payroll will be contacting you regarding any options available to you with regards to the deduction.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing below and returning this letter and a signed copy of the enclosed agreement to assign Intellectual Property and Conflict of Interest Form no later than January 23, 2019, retaining a copy for your records. Please email the signed scanned documents, followed by paper copies, to:

Katherine Price, Program Assistant
Office of the Dean
University of South Dakota
414 E. Clark Street
Vermillion, SD 57069
Katherine Price@usd.edu

Encs: Intellectual Property Policy
Intellectual Property Form
Conflict of Interest Form
Employee Personal Data Sheet

cc: Kaius Helenurm, Chair, Department of Biology
Karen Koster, Acting Chair, Department of Biology
Nathan Gotto, Human Resources Representative

I accept the job offer outlined above. Range T	1/10/19
Signature of Appointee	Date • .

Household Moving Allowance State of South Dakota

When Application and A	athorization sections	Please check one:		
are completed, please sub		State Transfer (SDCL 3-9-9	9)	
State Board of Finance		Full-time continuous employm		
Office of Secretary of State	;	Professional Recruitment (5		
500 E Capitol Ave		Attach a written copy of the offer		
Pierre SD 57501 Ph	one: 605-773-3537	moving expenses.		
PLEASE NOTE: The rec	quest and all supporting documentati	on must be received in the Office	e of the Secretary of State no	
later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST				
Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MOS1 comply with Bureau of Human Resources policies regarding protection of personally identifiable information.				
comply with Buleau of Hu				
	Appli	cation		
Kirsten Saige Kel	melis	Assistant Professor	University of South Dakota	
Name of Applicant		New Position Title	Agency Employed By	
	Otata Callege DA			
\$58,000	State College, PA	Vermillion	July 2019	
Yearly Salary	City, State Moving From	New Post of Duty (City)	Expected Month/Year of Move	
000		August 22, 2019		
00800		Employment Date with the State		
Bureau of Human Resourc	es Class Code	• • •		
Signature of Applicant		5 //4 / 17 Date		
Signature of Applicant	-	Duc		
Authorization				
Authorization				
The undersigned agent hereby certifies that the above individual is employed in a full-time position with the above agency, that the agency ordered the applicant to move as indicated, and that the move will be for the benefit of the State of South Dakota. The Agent further declares that, to the best of the Agent's knowledge and belief, the request and authorization for reimbursement of actual household moving expenses are true and correct.				
Emery Wasley			ent, Human Resources	
Name of Authorized Agen	t	Position/ Title of Authorized Ag	ent	
> $>$ $>$	1 5/28/19	University of South [Dakota	
		Agency of Authorized Agent		
Signature of Authorized	Agent Date	Agency of Admonized Agenc		
-	Approval by State	e Board of Finance		
	Approval by State	5 DOALG OF FINANCE		
Approved by the State				
Board of Finance on	ate Signatur	re of Secretary, State Board of Fin	200	



MEMORANDUM

DATE:

March 6, 2019

TO:

FROM:

Michael Kruger, Dean, College of Arts & Sciences

RE:

Appointment with the Department of Anthropology & Sociology, University of South Dakota

I am pleased to offer you, subject to approval by the Board of Regents, an appointment as Assistant Professor in the Department of Anthropology & Sociology. The effective date of this appointment is August 22nd, 2019. Annual appointment dates are August 22nd through May 21st. The salary for this position is \$58,000 based on nine months at 100% time. Dr. John Dudley is your direct supervisor. As with all employees, you will be evaluated annually. This offer is contingent on the favorable results of a background check.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime. This offer is contingent upon completion of the Ph.D. degree. Beginning the position on August 22nd, 2019 without a Ph.D. will reduce your starting salary to \$56,500. When you have completed your degree, you will receive a \$1,500 degree completion increase for the academic year following that in which the degree is awarded. Completion of all requirements means diploma-in-hand or written verification from the dean of the graduate school of the degree-granting institution that all requirements for the Ph.D. have been completed. If you do not complete all requirements for the degree by December 2019, your position may be reopened and re-advertised.

You are required to provide an official transcript for your highest degree within 30 days of accepting this position. The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No. 4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records. In addition to the intellectual properties, also enclosed is a conflict of interest form, please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of University of South Dakota. Withholding statements (W-4's) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from your Human Resources Office. Your portion of these forms must be completed on or before your first day of employment. BOR requires direct deposit of payroll checks for all employees.

Your position is eligible for state benefits to include household moving allowance as outlined in SDCL 3-9-12. The University of South Dakota will provide up to \$3,000 in moving expenses. Reimbursed moving expenses are considered taxable income. Once you receive payment, Payroll will contact you to determine how the payment is recorded as taxable income. Please note that the amount must be recorded as income in the calendar year it is received. Guidelines on allowable expenses may be found at http://legis.state.sd.us/rules/DisplayRule.aspx?Rule=05:01:07&Type=Rule.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing below and returning this letter, the attached personal data sheet, and a signed copy of the enclosed agreement to assign Intellectual Property and Conflict of Interest Form no later than March 15, 2019, retaining a copy for your records. Send the signed documents to:

Katherine Price
Program Assistant
Office of the Dean/College of Arts & Sciences
The University of South Dakota
414 E. Clark. St.
Vermillion, SD 57069
Katherine.Price@usd.edu

cc: John Dudley, Interim Chair, Department of Anthropology & Sociology Nathan Gotto, HR Generalist, Office of Human Resources

I accept the job offer outlined above.

3/18/20

Signature of Appointee & Date Signed

Encl: Intellectual Property Policy

Intellectual Property Form Conflict of Interest Form

Employee Personal Data Sheet

Household Moving Allowance State of South Dakota

When Application and A	uthorization sections	Please check one:		
are completed, please sub		State Transfer (SDCL 3-9-9		
State Board of Finance		Full-time continuous employn		
Office of Secretary of State	;	Professional Recruitment (SDCL 3-9-12)	
500 E Capitol Ave	406 553 3635		of employment and of payment of	
Pierre SD 57501 Pl	none: 605-773-3537	moving expenses.	e of the Secretary of State no	
PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month.				
Documentation received a	fter that time will be processed at t	the next Board of Finance meeting	g. All documentation MUSI	
comply with Bureau of Hu	man Resources policies regarding pro	tection of personally identifiable ir	nformation.	
		ication		
Dr. Eric Kinnamor	า	Asst. Prof. Management	USD - Vermillion	
Name of Applicant	-	New Position Title	Agency Employed By	
\$115,000.00	Athens, AL	Vermillion	August 22, 2019	
Yearly Salary	City, State Moving From	New Post of Duty (City)	Expected Month/Year of Move	
1 carry satary	City, State Moving From	August 22, 2019	·	
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Bureau of Human Resourc	es Class Code	Employment Date with the State		
Signature of Applicant	>	16 MAY 20/	9	
		/		
Authorization				
that the agency ordered the The Agent further declares	t hereby certifies that the above indiverselvent to move as indicated, and to that, to the best of the Agent's knowing expenses are true and correct.	that the move will be for the benefit	t of the State of South Dakota.	
Emery Wasley			nt, Human Resources	
Name of Authorized Agen		Position/ Title of Authorized Age	ent	
\(\frac{1}{2}\)	1 6/6/19	University of South D	Dakota	
Signature of Authorized A		Agency of Authorized Agent		
,	Approval by State	e Board of Finance		
	Approvatoy state	O DOME OF FRIMING		
Approved by the State				
Board of Finance on D	ate Signatu	re of Secretary. State Board of Fina	ince	
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MEMORANDUM

DATE:

April 16, 2019

TO:

Dr. Eric Kinnamon

FROM:

Dr. Venky Venkatachalam, Dean of the Beacom School of Business, University of South Dakota

RE:

Appointment with Beacom School of Business, University of South Dakota

I am pleased to offer you, subject to approval by the Board of Regents, a tenure-track appointment as an Assistant Professor of Management in the Beacom School of Business. The effective date of this appointment is August 22, 2019 with an annual salary of \$115,000.00. Annual appointment dates are August 22 to May 21 for 9 months at 100%. As with all faculty, you will be evaluated annually. This offer is contingent on the favorable results of a background check.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

You are required to provide an official transcript for your highest degree within 30 days of accepting this position. The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No.4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records. In addition to the intellectual properties, also enclosed is a conflict of interest form, please review the policy, sign where indicated and return with this this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of the University of South Dakota. Withholding statements (W-4's) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from your Human Resources Office. Your portion of these forms must be completed on or before your first day of employment. The Board of Regents requires direct deposit of payroll checks for all employees.

In addition, with the final provision of the Immigration Act of 1990, Public Law No. 101-649, effective October 1, 1991, Section 214.2 (h) (6) (vi) (E), the Beacom School of Business will comply with the directives of the law until the end of your authorized employment under the H-1B status.

Your position is eligible for state benefits to include household moving allowance of up to 1 month salary as outlined in SDCL 3-9-12. The University of South Dakota will provide up to \$8,000.00 reimbursable for moving expenses in compliance with BOR policies and procedures.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing. below and returning this letter and a signed copy of the enclosures titled: Agreement to Assign Intellectual Property Rights and Conflict of Interest no later than April 17, 2019 by 10 AM central, retaining a copy for your records. Send the signed documents to:

Kimberley Andres Beacom School of Business University of South Dakota 414 E. Clark Street Vermillion, SD 57069

Encl:
Agreement to Assign Intellectual Property Rights Confidentiality Statement Conflict of Interest Direct Deposit Personal Data Statement I-9 W-4

co: Dr. Kurt Hackemer, Provost Carl Gutzman, USD Human Resources Kimberley Andres, Beacom School of Business payroll representative

I accept the job offer outlined above.

Household Moving Allowance State of South Dakota

When Application and Authorization sections	Please check one:	
are completed, please submit the original to:	State Transfer (SDCL 3-9-9	
State Board of Finance	Full-time continuous employm	
Office of Secretary of State	Professional Recruitment (S	BDCL 3-9-12)
500 E Capitol Ave Pierre SD 57501 Phone: 605-773-3537	Attach a written copy of the offer of moving expenses.	of employment and or payment or
PLEASE NOTE: The request and all supporting documentati	on must be received in the Office	of the Secretary of State no
later than 5:00 n.m. CT eight days prior to the Board	of Finance meeting on the th	ird Tuesday of the month.
Documentation received after that time will be processed at t	he next Board of Finance meening	g. All documentation MOS1
comply with Bureau of Human Resources policies regarding pro		formation.
Appli	cation	
Elizabeth Manser Payne	Asst. Prof. Marketing	USD - Vermillion
Name of Applicant	New Position Title	Agency Employed By
\$112,000,00 W/o PhD or \$122,000,00 W PhD OShKosh, WI	Vermillion	August 22, 2019
Yearly Salary City, State Moving From	New Post of Duty (City)	Expected Month/Year of Move
00 800	August 22, 2019	
	Employment Date with the State	
Bureau of Human Resources Class Code		
expenses subject to the limitations established by South Dahousehold moving expenses.		
household moving expenses.	4.23. 2010]
	4.23. 2010 Date	1
Signature of Applicant	Date rization ridual is employed in a full-time po	sition with the above agency, t of the State of South Dakota.
Signature of Applicant Author The undersigned agent hereby certifies that the above individual that the agency ordered the applicant to move as indicated, and The Agent further declares that, to the best of the Agent's know	Date Prization Indual is employed in a full-time posithat the move will be for the benefit ledge and belief, the request and available Assistant Vice Preside	sition with the above agency, t of the State of South Dakota. thorization for reimbursement
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MEMORANDUM

DATE

December 10, 2018

TO:

Elizabeth Manser Payne

FROM:

Dr. Venky Venkatachaiam, Dean of the Beacom School of Business, University of South Dakota

RE: Appointment with Beacom School of Business, University of South Dakota

I am pleased to offer you, subject to approval by the Board of Regents, a tenure-track appointment as an Assistant Professor of Marketing in the Beacom School of Business. The effective date of this appointment is August 22, 2019. Contingent on the completion of a DBA prior to August 22, 2019, your annual salary will be \$122,000.00. If you have not completed your DBA by August 22, 2019, your annual salary will be \$112,000.00 until such time you complete your DBA at which time your salary will be adjusted to \$122,000.00 starting the following pay period. Annual appointment dates are August 22 to May 21 for 9 months at 100%. As with all faculty, you will be evaluated annually. This offer is contingent on the favorable results of a background check.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

You are required to provide an official transcript for your highest degree within 30 days of accepting this position. The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No.4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records. In addition to the intellectual properties, also enclosed is a conflict of interest form, please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of the University of South Dakota. Withholding statements (W-4's) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from your Human Resources Office. Your portion of these forms must be completed on or before your first day of employment. The Board of Regents requires direct deposit of payroll checks for all employees.

In addition, with the final provision of the immigration Act of 1990, Public Law No. 101-649, effective October 1, 1991, Section 214.2 (h) (6) (vi) (E), the Beacom School of Business will comply with the directives of the law until the end of your authorized employment under the H-1B status.

Your position is eligible for state benefits to include household moving allowance of up to 1 month salary as outlined in SDCL 3-9-12. The University of South Dakota will provide up to \$10,000.00 reimbursable for moving expenses in compliance with BOR policies and procedures.

If you understand and agree to the terms and conditions of this offer, please indicate your acceptance by signing below and returning this letter and a signed copy of the enclosed agreement to assign Intellectual Property and Conflict of Interest Form no later than December 11, 2018 retaining a copy for your records. Send the signed documents to:

Kimberley, Andres@usd.edu Kimberley Andres Beacom School of Business University of South Dakota

Encl: (7)
Agreement to Assign Intellectual Property Rights
Confidentiality Statement
Conflict of Interest
Direct Deposit
Personal Data Statement
I-9
W-4

co: Dr. Kurt Hackemer, Interim Provost
Carl Gutzman, USD Human Resources
Kimberley Andres, Beacom School of Business payroll representative

I accept the job offer outlined above.

Signature of Appointee

12.11.2018.

Date

Household Moving Allowance State of South Dakota

When Application and Authorization sections	Please check one:	
are completed, please submit the original to:	State Transfer (SDCL 3-9-9	
State Board of Finance	Full-time continuous employn	
Office of Secretary of State	Professional Recruitment (
500 E Capitol Ave Pierre SD 57501 Phone: 605-773-3537	Attach a written copy of the offer moving expenses.	of employment and of payment of
PLEASE NOTE: The request and all supporting documentati		e of the Secretary of State no
later than 5:00 p.m. CT eight days prior to the Board	of Finance meeting on the th	ird Tuesday of the month.
Documentation received after that time will be processed at t	he next Board of Finance meetin	g. All documentation MUST
comply with Bureau of Human Resources policies regarding pro	cation	HOTHAUOL.
,		USD - Vermillion
Dr. Victor Pimentel	Asst. Prof. Decision Science New Position Title	Agency Employed By
Name of Applicant		
\$115,000.00 Wilson, NY	Vermillion	August 22, 2019
Yearly Salary City, State Moving From	New Post of Duty (City)	Expected Month/Year of Move
00.800	August 22, 2019	
Bureau of Human Resources Class Code	Employment Date with the State	
· ·		
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household moving expenses.	April 22nd 2019	
household moving expenses.		
Signature of Applicant	April 22nd 2019 Date	
Signature of Applicant Author	April 22nd 2019 Date rization	
Signature of Applicant	April 22nd 2019 Date rization dual is employed in a full-time pontat the move will be for the benefit	t of the State of South Dakota.
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MEMORANDUM

DATE:

March 18, 2019

TO:

Dr. Victor Pimentel

FROM:

Dr. Venky Venkatachalam, Dean of the Beacom School of Business. University of South Dakota

RE:

Appointment with Beacom School of Business, University of South Dakota

I am pleased to offer you, subject to approval by the Board of Regents, a tenure-track appointment as Assistant Professor of Decision Sciences in the Beacom School of Business. The effective date of this appointment is August 22, 2019 with annual salary of \$115,000,00. Annual appointment dates are August 22 to May 21 for 9 months at 100%. As with all faculty, your performance will be evaluated annually. This offer is contingent on the favorable results of a background check.

This position has been identified as exempt from Fair Labor Standards Act (FLSA) and therefore not subject to overtime.

You are required to provide an official transcript for your highest degree within 30 days of accepting this position. The Board of Regents manages employee-created intellectual property pursuant to the South Dakota Board of Regents Intellectual Property Policy, Board Policy No.4:34. The provisions of this policy are enclosed. Please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records. In addition to the intellectual properties, also enclosed is a conflict of interest form, please review the policy, sign where indicated and return with this offer memo, retaining a copy for your records.

The appointment and terms of appointment are subject to and governed by the laws of the State of South Dakota and the policies, rules, and regulations of the South Dakota Board of Regents and of the University of South Dakota. Withholding statements (W-4's) and proof of identity and eligibility to work in the United States, pursuant to the Immigration Reform laws (I-9) are available from your Human Resources Office. Your portion of these forms must be completed on or before your first day of employment. The Board of Regents requires direct deposit of payroll checks for all employees.

In addition, with the final provision of the Immigration Act of 1990, Public Law No. 101-649, effective October 1, 1991, Section 214.2 (h) (6) (vi) (E), the Beacom School of Business will comply with the directives of the law until the end of your authorized employment under the H-1B status.

Your position is eligible for state benefits to include household moving allowance of up to 1 month salary as outlined in SDCL 3-9-12. The University of South Dakota will provide up to \$8,000.00 reimbursable for moving expenses in compliance with BOR policies and procedures.

If you understand and agree to the terms and conditions of this offer, please sign below and return documents via email no later than 10 AM central time on March 20, 2019.

Send the signed documents to: Venky@usd.edu co: Kimberley.Andres@usd.edu

Enol: (7)
Agreement to Assign Intellectual Property Rights
Conflidentiality Statement
Conflict of Interest
Direct Deposit
Personal Data Statement
I-9
W-4

co: Dr. Kurt Hackemer, Interim Provest
Carl Gutzman, USD Human Resources
Kimberley Andres, Beacom School of Business payroll representative

I accept the job offer outlined above.

Stenature of Appointee

March 18" 2019

State Hosting Reimbursement Request - SDCL 3-9-2.1

When Application and Authorization sections are completed, please submit the original to:

State Board of Finance - Office of Secretary of State Capitol Building - 500 E Capitol Ave - Pierre, SD 57501 Phone: 605-773-3537

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

Agency Phone Number:	Hosted Mistic Caldwell from Standard
Agency Phone Number: Employee Requesting Reimbursement: Total Amount of Reimbursement: Date(s) of Hosting Expense: Receipts Attached (Y) N Explanation of official business performed: Black Holls and Black Holls and I hereby request authorization and approval for reimburser incurred while hosting a prospect for business develop expenses were incurred through necessary duties of my enstate's interests, concerns, and activities and are supported of perjuty that this claim has been examined by me, and correct. Signature of Employee Au I hereby certify that the above employee was authorized to their employment on behalf of the State of South Dakota. interests relating to hosting a prospect for business development of Department Office Head	S.773. 499/ James Hager # 59.6 5/1/2019 Hooted Mistic Caldwell for the Mistigary Caldwell for the
Employee Requesting Reimbursement: Total Amount of Reimbursement: Date(s) of Hosting Expense: Receipts Attached Y N Explanation of official business performed: Black Hulls and I hereby request authorization and approval for reimburser incurred while hosting a prospect for business develop expenses were incurred through necessary duties of my enstate's interests, concerns, and activities and are supported of perjuty that this claim has been examined by me, and correct. Signature of Employee Au I hereby certify that the above employee was authorized to their employment on behalf of the State of South Dakota. interests relating to hosting a prospect for business development of Department Office Head	Hosted Mistic Caldwell grand Michelle Themson from Badlands Tourism Promotional activity. I certify that the fry employment with the State of South Dakota and in the furtherance of apported by the attached receipts. I declare and affirm under the penalties me, and to the best of my knowledge and belief, is in all things true and Date Authorization Date Authorization Authorization Position/Title of Agency Official Position/Title of Agency Official
Total Amount of Reimbursement: Date(s) of Hosting Expense: Receipts Attached Y N Explanation of official business performed: Splant and Contained to Splant and	Hosted Mistic Caldwell from Ballands Tourism Promosed to the expenses, set forth in the voucher attached hereto, that were development, trade, or a tourism promotional activity. I certify that the finy employment with the State of South Dakota and in the furtherance of apported by the attached receipts. I declare and affirm under the penalties me, and to the best of my knowledge and belief, is in all things true and Date Authorization Tourism promotional activity. Date Authorization Position/Title of Agency Official Position/Title of Agency Official
Receipts Attached Y N Explanation of official business performed: Splant	Hooted Michelle Themos gran Ballands Tourism Button Button Button Button Button Caldwell fit Button Button Button Indicated Tourism Indicated Presented Indicated Pr
Receipts Attached Y N Explanation of official business performed: Splant	Hooted Michelle Themos gran Ballands Tourism Button
Explanation of official business performed: Splant	Badlands Tour composition of expenses, set forth in the voucher attached hereto, that were development, trade, or a tourism promotional activity. I certify that the f my employment with the State of South Dakota and in the furtherance of apported by the attached receipts. I declare and affirm under the penalties me, and to the best of my knowledge and belief, is in all things true and Date Authorization Orized to incur the claimed expenses while performing necessary duties of Dakota. I attest that the employee's claims were in the furtherance of state development, trade, or a tourism promotional activity. Position/Title of Agency Official Position/Title of Agency Official
I hereby request authorization and approval for reimburser incurred while hosting a prospect for business develop expenses were incurred through necessary duties of my en state's interests, concerns, and activities and are supported of perjuty that this claim has been examined by me, and correct. Signature of Employee Au I hereby certify that the above employee was authorized to their employment on behalf of the State of South Dakota, interests relating to hosting a prospect for business development of Department Office Head	Badlands Tour composition of expenses, set forth in the voucher attached hereto, that were development, trade, or a tourism promotional activity. I certify that the f my employment with the State of South Dakota and in the furtherance of apported by the attached receipts. I declare and affirm under the penalties me, and to the best of my knowledge and belief, is in all things true and Date Authorization Orized to incur the claimed expenses while performing necessary duties of Dakota. I attest that the employee's claims were in the furtherance of state development, trade, or a tourism promotional activity. Position/Title of Agency Official Position/Title of Agency Official
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incurred while hosting a prospect for business development of perjuty that this claim has been examined by me, and correct. Signature of Employee Au I hereby certify that the above employee was authorized to their employment on behalf of the State of South Dakota. intelests relating to hosting a prospect for business development of Department Office Head	Authorization Position/Title of Agency Official Tage Position/Title of Agency Official Position/Title of Agency Official
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incurred while hosting a prospect for business development of perjuty that this claim has been examined by me, and correct. Signature of Employee Au I hereby certify that the above employee was authorized to their employment on behalf of the State of South Dakota. intelests relating to hosting a prospect for business development of Department Office Head	Authorization Position/Title of Agency Official Tage Position/Title of Agency Official Position/Title of Agency Official
I hereby certify that the above employee was authorized to their employment on behalf of the State of South Dakota. intelests relating to hosting a prospect for business development of Department Office Head	prized to incur the claimed expenses while performing necessary duties of Dakota. I attest that the employee's claims were in the furtherance of state development, trade, or a tourism promotional activity. Position/Title of Agency Official Position/Title of Agency Official
their employment on behalf of the State of South Dakota. interests relating to hosting a prospect for business development of Department Office Head	Dakota. I attest that the employee's claims were in the furtherance of state development, trade, or a tourism promotional activity. Position/Title of Agency Official Position/Title of Agency Official
intelests relating to hosting a prospect for business develop Left. of John Lanes of Department Office Head	development, trade, or a tourism promotional activity. Contary of Jourism Position/Title of Agency Official May 29 2019
Name of Department/Office Head	Position/Title of Agency Official Position/Title of Agency Official Position/Title of Agency Official
	May 28, 2019
Signature of Department/Office Head	Date ()
Signature of Department/Office Head	Date
/ / / //	
State Board of	pard of Finance Approval
Approval Date:	
	Signature of Secretary, State Board of Finance form and receipts to voucher to be sent to the State Auditor's Office.

Redwater Kitchen 741 Main Street Suite 120 Spearfish, SD 57783 605-727-2404

Dine In #79

Server: Table:	Gary L. 200	05/01/2019 01:00PM
Guests: Receipt:	2 31759	Register-1
1 x Avocado Toast	Toast	8.00
S Add S	Add Side Chicken	4,00
- Add A	Add Avocado	2.00
1 x Charred	Charred Beet Salad	12.00
- Add Bacon	acon	2.00
×	Fire Course 2_copy	00.0
2 x Seasonal Ice] Ice Cream	10.00
Subtotal		48.00
es	Tax	96.0
Hospitality Tax	Tax	0.48
State Sales	Tax	2.17

Suggested Tip

Balance Due

<u>2</u>

18% = 8.64 20% = 9.60 25% = 12.00

Thank you!

Redwater Kitchen /41 Main Street Suite 120 Spearfish, SD 57783 605-727-2404

Gary L. 79

Server:

05/01/2019 01:14PM

31759 Order: Receipt:

HAGEN/JAMES D XXXXXXXXXXXX1004 Swipe

Card Holder: Card Number: Entry Method: Card Type: Approval:

Amex 343025753

\$51.61

Amount:

+ Tip:

= Total: 5% '

I agree to pay the above amount according to the card issuer agreement.

F## CUSTONER COPY *** Suggested Mp ζ α '''

ا ×

TOtal \$59.61

State Hosting Reimbursement Request - SDCL 3-9-2.1

When Application and Authorization sections are completed, please submit the original to:

State Board of Finance - Office of Secretary of State Capitol Building - 500 E Capitol Ave - Pierre, SD 57501

Phone: 605-773-3537

PLEASE NOTE: The request and all supporting slocume State no later than 5:00 p.m. CT exhib days brilling a month. Documentation received after that time will	De prycessed at the new Boat of Topics of the Science of the December 1
documentation MUST comply with Bureau of Human Re-	cources policies regarding protection of personally Mandilabi
	lication
Date:	Agency: TowiSim
Agency Address: 711 E Wells 4	
Agency Phone Number: 773-330	
Employee Requesting Reimbursement:	
Total Amount of Reimbursement:	2014801
Date(s) of Hosting Expense: 5 8 1 9	
Receipts Attached: Y/N	
	dinner was part of a training
tales your en de large se	sonal welcome center employees
I hereby request authorization and approval for reimburseme incurred while hosting a prospect for business developme expenses were incurred through necessary duties of my emp state's interests, concerns, and activities and are supported by	ent of expenses, set forth in the voucher attached hereto, that were ent, trade, or a tourism promotional activity. I certify that the loyment with the State of South Dakota and in the furtherance of by the attached receipts. I declare and affirm under the penalties of the best of my knowledge and belief, is in all things true and Date
	orization
I hereby certify that the above employee was authorized to in their employment on behalf of the State of South Dakota. I a interests relating to hosting a prospect for business developm	neur the claimed expenses while performing necessary duties of ttest that the employee's claims were in the furtherance of state ent, trade, or a tourism promotional activity.
Wanda Gordman	betwhy Secretary
Name of Department/Office Head	Position/Title of Agency Official
Mar John	5.15.19
Signature of Department/Office Head	Date
State Board of	Finance Approval
Approval Date:	**

Signature of Secretary, State Board of Finance Note: When completed, attach the original form and receipts to voucher to be sent to the State Auditor's Office. CHARGE RECEIPT Lintz Brothers Pizza Hermosa Here 05/08/2019 6:24P Trans 00000175903

Order 345

Server: Brian	L.
Guest: Nate	
Amount: \$216.0	00

Gratuity:

Total:

VISA

Card No:: *****3633 Approval: 008078

FAM Pai	FAM Participants
First Name	Last Name
Dorene	Ammann
Cynthia	Haggerty
Ron	Evenson
Geri	Remmes
Ellen	nosuyor
Nancy	Foster
Betty	West
Jodi	Rezac
Kathleen	Falor
Clifton	Stone
Deborah	Rinehart
Sara	Miles
Reed	Haug
Dee	Diedrich
Steve	Christensen
Lucille	Holsether
Madisen	Grenstiner
Nate	Johnson



Nate Johnson Department of Tourism Phone: 605-773-3301 TravelSouthDakota.com

From: TOPR1SCAN1@state.sd.us <TOPR1SCAN1@state.sd.us>Sent: Monday, May 13, 2019 11:27 AM

To: Johnson, Nate < Nate. Johnson@travelsouthdakota.com>

Subject: Message from KM_368

State Hosting Reimbursement Request - SDCL 3-9-2.1

When Application and Authorization sections are completed, please submit the original to:

State Board of Finance - Office of Secretary of State Capitol Building - 500 E Capitol Ave - Pierre, SD 57501 Phone: 605-773-3537

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable

Application
Date: SIRRIIA Agency Address: 711 EWEIS Ave
Agency Address: 773 3301 Agency Phone Number: \$ 773 3301
Employee Requesting Reimbursement: Katlyn Richter
Total Amount of Reimbursement: 45.20
Date(s) of Hosting Expense: 5/15/19
Receipts Attached: (Y)/ N
Explanation of official business performed:
Hosting journalists for arts and sullpture priss trip.
Hosting journalists for arts and sculpture priss trip. Had lunch with Visit Rapid city as the group came
into town-
I hereby request authorization and approval for reimbursement of expenses, set forth in the voucher attached hereto, that were incurred while hosting a prospect for business development, trade, or a tourism promotional activity. I certify that the expenses were incurred through necessary duties of my employment with the State of South Dakota and in the furtherance of state's interests, concerns, and activities and are supported by the attached receipts. I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct. Signature of Employee Date
Authorization
I hereby certify that the above employee was authorized to incur the claimed expenses while performing necessary duties of their employment on behalf of the State of South Dakota. I attest that the employee's claims were in the furtherance of state interests relating to hosting a prospect for business development, trade, or a tourism promotional activity.
1 11 m 5.22.19
Signature of Department/Office Head Date
State Board of Finance Approval
Approval Date:Signature of Secretary, State Board of Finance

Note: When completed, attach the original form and receipts to voucher to be sent to the State Auditor's Office.

Tally's Silver Spoon 530 6th St Rapid City, SD 57701 ph 605-342-7621

\$36.00 \$2.70	\$38.70 379	
TABLE: Table 20 - 3 Guests Server: Katey S 5/15/2019 2:24:57 PM Sequence #: 0000176 ID #: 0544049 Subtotal Total Taxes	Grand Total \$3 :RICHTER/KATLYN F :VISA :xxxx xxxx xxxx 3879 :3879ycwv6xv8ethx :015369 :Katey S :Table 20	
TABLE: Table 20 Server: Ka 5/15/2019 2: Sequence #: ID #: 054 Subtotal Total Ta	Grand Crchase	

90.0

Payment Amount:

Tip:

R COPY
to pay the amount shown above.
Happy Hour Daily 4pm-6pm

runch with

Stacy Granum: Rapidcity CVB Carla Waldemar: Journalist Erin Abbott: Journalist

which Meal we hosted with journalist and visit Rapid City for our press trip.

1. partar + drinks - water + coffee

2. sandwich + drinks - teat soda 3. soup + bread + drink - tea

State Hosting Reimbursement Request - SDCL 3-9-2.1

When Application and Authorization sections are completed, please submit the original to:

State Board of Finance - Office of Secretary of State Capitol Building - 500 E Capitol Ave - Pierre, SD 57501 Phone: 605-773-3537

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Taesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

Application
Date: 5/30/19 Agency: Tourism
Agency Address: 711 E Wells Ave Pierre, SD 57501
Agency Phone Number: 605-64-773-330/
Employee Requesting Reimbursement: Direct Bill from Holiday Inn, Sperfish Cattached
Total Amount of Reimbursement: \$ 199.92
Date(s) of Hosting Expense: 5/02/19
Receipts Attached: / N
Explanation of official business performed: Breakfast for Tour Operators who were here
for the IRU Trade show and post Tour of Black Hills and Eastern SD.
No State employee
7101- (-74)20
expenses were incurred through necessary duties of my employment with the State of South Dakota and in the furtherance of state's interests, concerns, and activities and are supported by the attached receipts. I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct. Signature of Employee Date
Authorization
I hereby certify that the above employee was authorized to incur the claimed expenses while performing necessary duties of their employment on behalf of the State of South Dakota. I attest that the employee's claims were in the furtherance of state interests relating to hosting a prospect for business development, trade, or a tourism promotional activity.
Wander Goodman Deputy Secretary
Name of Department Office Head Position/Title of Agency Official
1 guda Cardinar 5-31-19
Signature of Department/Office Head Date
State Board of Finance Approval
Approval Date:
Signature of Secretary, State Board of Finance Note: When completed, attach the original form and receipts to voucher to be sent to the State Auditor's Office.



117

05-21-19

Department of Tourism United States

Folio No. A/R Number

Group Code Company Membership No.:

Invoice No.

Room No. :

9048 Arrival 04-12-19

Departure:

12-31-19

Conf. No. :

Rate Code: HOUSE

Page No. : 1 of 1

Date		Description		Charges	Credits
05-02-19	Banquet Brkfst - Food	558	E.	168.00	
05-02-19	Banquet Gratuity	558	",0	31.92	
			Total	199.92	0.00
		,	Balance	199.92	

Guest Signature:

I have received the goods and / or services in the amount shown heron. I agree that my liablity for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.



TOTAL AMOUNT

NAME OF GROUP

Department of Tourism \$ 199.92 **LOCATION BANQUET CHECK** Swarm Room NO. **PERSONS PERSONS** DATE May 2, 2019 GUARANTEED 21 **SERVED** 21 1 FOOD 21 @ 8.00 168.00 FOOD (See Breakdown) 2 FOOD TAX 7.5 % **EXEMPT** LIQUOR @ LIQUOR TAX 7.5 % **EXEMPT** 5 GRATUITY 19 % 31.92 6 GRATUITY TAX EXEMPT 7.5 % 7 ROOM RENTAL CHARGE 8 ROOM RENTAL CHARGE TAX 6.5 % **EXEMPT** 9 EQUIPMENT RENTAL 10 EQUIPMENT RENTAL TAX 65 % **EXEMPT** 11 SETUP FEE 12 SETUP FEE TAX 7.5 % **EXEMPT TOTAL AMOUNT** 199.92 **BREAKDOWN** Prepared By Eric Hoard

THE PROPERTY AND LEADING



Spearfish Holiday Inn Convention Center 305 North 27th Street | Spearfish, SD 57783 605.642.4683 | 800.999.3541 | Fax 605.642.9449

BANQUET EVENT ORDER

Page: 1 of 1

DAY & DATE: Thursday, May 2, 2019	GROUP NAME: Department of Tourism	
CONTACT: Cole Irwin	FUNCTION NAME: Breakfast	
ONSITE CONTACT: Cole Irwin	ADDRESS: 711 East Wells Avenue	
PAYMENT: Upon Departure	Pierre, SD 57501-336	
TAX EXEMPT: ☐ No ☑ Yes - Tax Exempt Number:	HOTEL CONTACT: Angie	

BREAKFAST

TIME: 6:45 am: Open

7:00 am - 8:00 am

ROOM: Swarm

NUMBER: 21 30

RENTAL: Complimentary

SETUP	AUDIO VISUAL REQUIREMENTS
Boardroom.	n/a
MENU	BAR SERVICE
SERVED AT 7:00 AM.	n/a
FRESH & FRUITY SERVED @ \$8 (\$9.52 inclusive) PER PLATE. Fresh Seasonal Fruit	
Bakery Muffin	
Flavored Yogurt	
Coffee and Ice Water	

Prices in parenthesis are inclusive - include applicable taxes and service charge.

21 to Dept. of Tourism 9 to NO Tourism

OUTSIDE FOOD & BEVERAGE IS NOT ALLOWED IN MEETING/BANQUET ROOMS. HOTEL RESERVES THE RIGHT TO REASSIGN THE ABOVE SPACE. ALL FOOD & BEVERAGE TICKETS ARE SUBJECT TO A 7.5% TAX AND 19% SERVICE CHARGE. A 6.5% TAX IS APPLIED TO ROOM RENTAL. FINAL GUARANTEE NUMBER TO BE GIVEN TO HOTEL THREE (3) BUSINESS DAYS PRIOR TO FUNCTION. IF NO FINAL GUARANTEE IS RECEIVED, THE ESTIMATED NUMBER WILL BE USED AS THE GUARANTEE. IF ACTUAL GUEST COUNT EXCEEDS 105% OF GUARANTEE NUMBER, A 25% SCRAMBLE FEE OVER THE ORIGINAL PRICE PER PERSON WILL BE CHARGED FOR EACH ADDITIONAL GUEST. I HAVE READ AND AGREE TO THE ABOVE.

CLIENT SIGNATURE

HOTEL REPRESENTATIVE

Breakfast Bariquet Guests

First Name	Last Name	Company	Country	E-mail	
Alain	Kasteleyn	Discover North America	UK	alain@discovernorthamerica.co.uk	_
Dirk	Buettner	ARGUS REISEN GmbH	Germany	dirk@argusreisen.de	_
Manuela	Duebler	Faszination Fernweh GmbHweh	Germany	m.duebler@faszinationski.de)
Caroline	Davidson	Great American West - AU/NZ	Australia	caroline@davcomm.com.au	TO THE PARTY OF TH
Julie	Gerrard	Adventure World NZ	New Zealand	jules.gerrard@adventureworld.co.nz	-
Katia	Malavasi	Gastaldi - Holidays to Live	Italy	kmalavasi@gastaldi.it	7.7
llaria	Vergani	BIGMAMA	Italy	ilaria@bigmama.travel	
Jesus	Avila	America 4 You L.L.C.	USA	jesus@america4you.net	- c
Caroline	Jaffrès	Marco Vasco	France	cjaffres@marcovasco.fr	_
Aurélia	Cancellieri	Europe active	France	aurelia@europe-active.com	- -
Gloria	Boyer	La Maison des Etats Unis	France	gloria.boyer@lesmaisonsduvoyage.com	
Nodine Kelly Amondin Maggi Fatma Jung Bridge	Mirnac Tran ic Cai smi Indi-	h, FTI I Voyageurs Li Min Hon, Lest Euro M. I Aneron As you Fills, RMI Nias, RMI, US Jenny, UK OFC Ey, Man, Inch Selling Tridge, Selling	sermy Like Face Like it, Like it,	va vel	

(No state employees)

State Hosting Reimbursement Request - SDCL 3-9-2.1

When Application and Authorization sections are completed, please submit the original to:

State Board of Finance - Office of Secretary of State Capitol Building - 500 E Capitol Ave - Pierre, SD 57501 Phone: 605-773-3537

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

nformation.	Application
Date: 05/16/2019	Agency: GOED
Agency Address: 2329 N Career Ave., Suite 221,	11801107
Agency Phone Number: 605-367-4516	
Employee Requesting Reimbursement: John A	ustin
Total Amount of Reimbursement: \$80.00(total)	
Date(s) of Hosting Expense: 05/10/19	<u> </u>
Receipts Attached: (Y)/ N	
	siness prospect hosting that included the owner and managing
partner of a company. Kyle Peters and Nate Graf of	of GOED were also present.
incurred while hosting a prospect for business devel expenses were incurred through necessary duties of my state's interests, concerns, and activities and are support	resement of expenses, set forth in the voucher attached hereto, that were opment, trade, or a tourism promotional activity. I certify that the remployment with the State of South Dakota and in the furtherance of rted by the attached receipts. I declare and affirm under the penalties and to the best of my knowledge and belief, is in all things true and Date
	Authorization
	d to incur the claimed expenses while performing necessary duties of ta. I attest that the employee's claims were in the furtherance of state elopment, trade, or a tourism promotional activity.
Steve Westra	Commissioner
Name of Department/Office Head	Position/Title of Agency Official
	5-21-19
Signature of Department/Office Head	Date
State Board	d of Finance Approval
Approval Date:	
	Signature of Secretary, State Board of Finance

Note: When completed, attach the original form and receipts to voucher to be sent to the State Auditor's Office.

PERKINS RESTAURANT & BAKERY Store #3625 2205 E 6th Street Brookings, SD 57006 (605) 692-4400

369 J	IJ	l.	1	t.
-------	----	----	---	----

202 40011	THE PART THE REAL PROPERTY AND THE COST OFF THE PART THE THE THE PART THE
Tbi 57/1	Gst 5 05AM
1 BUILD-A- BRKFST 1 COFFEE 1 SKIL- EVERY MUFN - BLUE \$\$ 1 COFFEE 1 BYO OMEL 1 ICED TEA 1 BYO OMEL CHS- CHEDDAR\$\$ 1 MILK LARGE 1 BYO OMEL CHARGED TIP XXXXXXXXXXXXXXX8121 MC/VISA	8.99 2.29 9.99 1.99 2.29 10.29 2.89 10.29 0.79 2.99 10.29 12.18
SUBTOTAL TAX CHARGED TIP PAYMENT	63.09 4.73 12.18 80.00 losed 0:01AM

*************** TAKE HOME SOME FRESH BAKERY TODAY!



Home Station Per Diem Reimbursement Request - SDCL 3-9-2,2

When Application and Authorization sections are completed, please submit the original to:

State Board of Finance - Office of Secretary of State Capitol Building - 500 E Capitol Ave - Pierre, SD 57501 Phone: 605-773-3537

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

A	Application
Date: 5/21/9 Agency Address: 445 F. Coortol-	Agency: Department of Pevenus
Agency Phone Number:	3311
Employee Requesting Reimbursement:	attachment
Total Amount of Reimbursement:	.00
Date(s) of Expense: Event Leave Time: **Time: The second contains the second contain	Event Return Time: may 8 8AM-5PM
Explanation of official business performed:	
department's annual de	
_ 1	meach of eleven offices.
and the second	andore contention.
entirely through a meal time without interruption and inc	rters station or place of residence. I certify that the event extended cluded a meal provision for which I was billed. I declare and affirm amined by me, and to the best of my knowledge and belief, is in all Date
I hereby certify that the above employee was authorized to residence while performing necessary duties of their employee's participation in the event was in the furtherance	
Jim Termilliger	Secretary
Name of Department/Office Head	Position/Title of Agency Official
Ji Tally	5-22-19
Signature of Department/Office Head	Date
State Board o	of Finance Approval
Approval Date:	Cionatina of County, Chata David of Figure
	Signature of Secretary, State Board of Finance

Note: When completed, attach the original form and receipts to voucher to be sent to the State Auditor's Office.



South Dakota Department of Revenue

445 East Capitol Avenue Pierre, SD 57501-3100

(605)773-3311

MEMORANDUM

Date:

May 21, 2019

To:

John Hanson, Deputy Director of Finance and Internal Controls

From:

Bobi Adams, Deputy Director of Strategy & Communications

Subject:

Home Station Reimbursement Request

Enclosed is the home station per diem reimbursement request along with the signed forms completed by DOR employees. The names denoted with an asterisk identify those home station employees. The remaining names are out-of-town DOR employees.

The meeting was conducted in Pierre May 7 -8th, 2019. On Tuesday the meeting was from 11 a.m.– 5 p.m.; Wednesday was from 8 a.m. to 5 p.m.

	Tuesday, May 7 th	Wednesday, May 8 th	
Home Station	64	64	= 12
Out-of-Town	96	97	
Total	160	161	

If you have any questions, please let me know.

INVOICE



14 May 2019

3531

Drifters Bar and Grille

325 Hustan Ave Fort Pierre, SD 605.220.5014 **Department of Revenue**

	Home		Home	
QUANTITY	str	DETAILS	UNIT PRICE 5 LINE TOTAL	L
160	64	May 7 Lunch (Taco Salad Bar)	11.00 4704.00 1760.0	0
161	44	May 8 Lunch (Sandwich Board)	11.00 4704. 1771.0	О
-	128		41,408.00	
		Tax	7.5% exemp	ot

Final Balance

\$3,531.00

MEETING DETAILS

OTHER INFORMATION

Event Date: 5/7/19-5/8/19

Event Time: 8:00AM

Event Room: entire space

Guest Count: 170

Name		Tuesday 05/07/2019	Wednesday 05/08/2019	Signature	
JANE	AASBY			Lane Oschy	
LINDA	ADAM	1/	V	Ine Ala	
ВОВІ	ADAMS 💥	1	W	Barblo	
JENNIFER	AKER	V	レ	Jemp a	
ABIGAIL	ALBERS X	V	ン	aligal malle	
OWEN	ANDERSON 🕌		V	m	
JOSH	BECKER X	V	V	man-	
scott	BERGLIN	V	V	Solar	
ANGELA	BIEBER X		1	Augler Bein	
JOHN	BJORK		V		Please
LISA	BLUDORN	*/	1	Hora Bludon	check the days you
ANGELA	BORMANN	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	X	Min h	will be joining us
SHAYLIN	BORNS	~	X		for lunch
PAT	BOYLES	X	X	Part Boy le	
NANCY	BUGAY			7	
ELIZABETH	BURDICK ¥	χ	X	Chyaluta Frances	
TASKA	CANTWELL	V	$\sqrt{}$	Taska Cantwell	
BRYAN	CHESSHIR	7	V	Bria Chalina	
SUSAN	CHRISTIAN	/		Susan Saristian	Hares * Den
GREG	CLELAND				emple
JODI	Crond ⊀	Y	× (Quanth- Ch	
LORI	COLBERG			Lle m	
RYAN	CONWAY-HAY	V	1	Bor Comon Hy	
LARA	CUNNINGHAM	W	/	Fara Cunington	
JANET	DAHLERUP	ÓD	90	Gant Tolley] (
,				<u> </u>	- (

be g us nch

renotes restation nployees

Name		Tuesday 05/07/2019	Wednesday 05/08/2019	Signature 3
JASON	DAHLERUP	1	1	Grand 1
ALYSSA	DAMIATA	1	V	Alysta Damat
P.AULA	DECKERT			1. m
DANIELLE	degenstein X	V	V	1 allowed
RYAN	DRESSEN	V		Ras
PHILLIP	DURKIN 🔾			Str Ist
BRANDI	ECKERT 🗶	/		Beand Exp
RANDY	EICHACKER	Car property of	A	1200
JERRY	ELLINGSON 💥		V	- pri Elley 201
WHITNEY	ELLWANGER 💥	1	~	armer IM
JASON	EVANS *	٧		from D. Ezuna
AMONI	FAONELUA	V	/	/ culu
ALEX	FARRELL	V	\checkmark	My Great
MARY	FLEMING 🕌	V	/	modes
HOLLEE	FORD			Allectul
JESSICA	FOSTER	$\sqrt{}$	V	9,-
KATHY	FREDERICKSEN	/		Lether trede
ARIC	FROST 💃		V	and It
DARRIN	GERRY		(Dat
LAUREN	GILSRUD 🕌	/	/	Sourmed Sono
BROOKE	GOFF			
MARLA	GRUBER 🕌	$\sqrt{}$		Mala Calo
MORGAN	GRUEBELE 💥	V	V/	Allian Prubal.
TAMMY	HAGMANN	processor.	V	fandlag
KELLY	HANSON	$\sqrt{}$	V	Kelly Nansan

*Denotes Home Station employees

Name		Tuesday 05/07/2019	Wednesday 05/08/2019	Signature
ИНОГ	HANSON			
LORI	HAUPT	XH	SH	Haupt
том	HELLAND	74	TH	Driblad
MARK	HELTZEL	WH)	χ	
CLARK	HEPPER ⊁	×	1	Claston
BRIAN	HERTEL	X	$\sqrt{}$	Byglittl
TAMMY	HEYING	X	Х	Yoling
BRANDI	HOERNER 🛠	X	X	Budden
KRISTIE	HOHN	7	`~	J. W. L.
MICHAEL	HOUDYSHELL 💥	Х	Х	MANAN
scoтт	HOWARD 💥	X	7	Scott Hayard
GEORGE	HUBBERT	91	M	Han Jahlo
MALLORY	ISBURG			Holing
ANDREA	JANSEN		V	1 mg
ROBERT	JENSEN	69	69	66 Jun
KEVIN	JOHNSON	L 200		B
KELSEY	JOHNSON	/	V	Kelsey Johnson
DAN	JOHNSON 🗶	V	$\sqrt{}$	Dan Cherry
ВЕСКУ	JUNG	V	V	Beller news
STACY	KAMPSHOFF			Sur bused
CODI	KINSMAN 🕌	V	V	Mik Kirmo
PATTY	KIRBY *	V	11/	Patty Kirky
PAULA	KNIGGE	1		Princip
STACY	LANGER	V	V	HANN
NIKKI	LANGER	V	V	Will

* Constes Home Station Employees



Name			Tuesday 05/07/2019	Wednesday 05/08/2019	Signature
WADE	LAROCHE	*	$\sqrt{}$	$\sqrt{}$	Wadelakochp
KATE	LEMMEL	*	- Lander	L udice	Kitt firmen
JILL	LENARDS		V	/	Gill Lenards
DENISE	LIKNESS		V		enso Ille
NORM	LINGEL	¥	V		Thrux
NED	LUND		V	i/	hat he
ADAM	MASKA		V		Adeillah
CHAD	MASTERS		V	V	Uhr Hart
HEATHER	MATHIS		J	1	Won Mane
JAMIE	MCCLUNG		\checkmark	/	Jan Jun
MIKE	MEHLHAFF	*	V	V	
MICHAEL	METTLER		•	~	A
MARSHALL	MILLI	*	V	V	All I
BETTY	MORFORD	¥	V	Lucia	Bathy May 400
JUDY	MORRIS		:/		Tax Piller
MARY	MURPHY	¥	L	Jane Park	nary Murchy
JACY	NELSON		V		Gary Welsen
MORGAN	NELSON	*	V	V-	Mayon
DOUG	NELSON		した	DN _	
ALAINA	NIEHOFF		AN	AM	Clana menon
SANDY	O'DAY	X -			Suy OD
LANA	OKESON		✓	✓	Fam Oleson
SCOTT	OLSON		~	U	Sur olse
KRISTIN	OWEN		V	V	Kinan
PILO	PENA		V	V	

* Denotes Home Station Employees



Name -		Tuesday 05/07/2019	Wednesday 05/08/2019	Signature.
MATTHEW	PIERSALL	MP	mp	
JULIE	PIRNAT-SCHULTZ**	AN	in (nedwarden
CHRIS	POCIASK	S	Co	92
REBECCA	POTHIER	7	Û	where
STEPHANNIE	RAMIREZ *	SRV	SLV	Stylell
RONALD	RAUSCH	1	V	K
NICHOLAS	rea 🗶			li Pr
LINDA	RICHARD		Ú	Lend Ridans
JEAN	RICHER	₽'	V	Georgia Com
JOHN	RICHTER		>	Jul 12
MEKELL	ROCKWELL X	1	V	Mikel Rodwell
SAKURA	ROHLEDER 💥		V	自身さら
VLADIMIR	RUX	W. San		This 11
RON	RYSAVY	V	V	
DAN	SAHR	1	V (Dan Jahr
DOUG	SCHINKEL ⊁	out.	<u>ب</u>	y L
MELISSA	SCHWADER	1/	~	Mile Kenn
WENDY	SEMMLER X	V	~	WY.
ASHLIE	SERBOUSEK		V	apangebout
ROB	SHEFFIELD	1 minutes	harana same	- Je J. J. J. S.
KATHIE	SILBERNAGEL 🛠	V	Section 2	Post rate C
JASON	SILVERNAGEL	/	~	0/2
NATHAN	skoglund -	V	V,	at
SARA	SMALL *		$\sqrt{}$	Junhou
KATHY	smith 💃	√		Kathy Guit

+ Cenotes Home Station Employees



Name		Tuesday 05/07/2019	Wednesday 05/08/2019	Signature
CRAIG	SPARROW	V	V	CSp
MYRON	STAHL	i kanamanan	V	Mantine
SALLY	STAUFER +	V	V	Starger
MIKE	STECKELBERG	×	4	2: h
AMBER	STEINKE X	X	X	Amber Steinlo
JANELLE	STEWART 🔾	V	المستحدية	Comelle Start
KAREN	SWANK	1	L	How dwar
SHAWN	SWANSON	, A	À.	She was
JIM	TERWILLIGER 💥	×	У	gi Tiller
LYNN	THIEMAN	~		man
ALANA	THOMAS 🛪	-	<u></u>	A Munas
JEFF	THOMAS	·		V
VERONICA	THORESON	1/		for Present
JOSEPH	THURY	V	V	Jess
DARREN	TIMM	V		90
DANI	TOBIN 💥	√	/	MAGN
KATIE	TOSTENSON 🛨	L		Laste =
TRISTAN	TUPY		/	Thotolype
том	VALENTINE ᄎ			0
JENNIFER	VAN ROEKEL	1	V	Tem Van Rala
HEATHER	VILLA 💥	X	X	A VIIIV
LUKE	VOGEL	~	X	21, 024
STARLA	VOLK	X	X	Steela bell
DANIEL	WEBSTER	1	χ	
MONICA	WEISCHEDEL ⊁	Ŋ	Y	Marie Wy Sulle

Please check the days you will be joining us for lunch

* Denotes Home Station Employees



Name.		Tuesday 05/07/2019	Wednesday 05/08/2019	Signature
VALERIE	WERNSMANN 💥	X	X	Villerie Wornsment
DAVID	WIEST ★	X	X	David Went
RACHEL	WILLIAMS 🛧	X	V	Kach & William Scheck the
DEBRA	WOLFF	χ	X	Del Word days you will be
DAWN	woods X	X	X	joining us for lunch
ROSA	yaeger 💥	X	X	Rose Theon
ASHLEY	ZILVERBERG 🛧	X	χ	ANLY THEYS
Alex	ي المالية		0	Jan 18 Car
Don	Tuff	X	X	DON TUFF
Develo	Poor	×	入	Lew I'm
Pania	Ochlast	Χ	X	Carlinet
Lind	R.dors*	X	X	Linda Richard
Brent	2 King *	X	Х	Bronda Jing
Ch-rles	Abrille	×	X	Ch4all
Shunn	Castongrat	X	X	3 am
1 ^ '	Camobell	X	X	Inja Campbell
				,

* Denotes have station employees

Home Station Per Diem Reimbursement Request - SDCL 3-9-2.2

When Application and Authorization sections are completed, please submit the original to:

State Board of Finance - Office of Secretary of State Capitol Building - 500 E Capitol Ave - Pierre, SD 57501

Phone: 605-773-3537

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable

Ap	pplication
Date: 5-22-19	Agency: Animal Industry Board
Agency Address: 411 S Fort St, Pierre SD 5	57501
Agency Phone Number: 605-773-3321	
Employee Requesting Reimbursement: Big Tom's	Diner
Total Amount of Reimbursement: \$370.00	
Date(s) of Expense: 5-22-19	
Event Leave Time: 10:00 am	Event Return Time: 4:00 PM
Explanation of official business performed: SD Cattle	e Identification Advisory Committee Meeting
Lunch provided for meeting.	
See Attached Roster, Agenda and Invo	ice.
incurred while conducting state business at my headquarte entirely through a meal time without interruption and inclu	nent of expenses, set forth in the voucher attached hereto, that we ers station or place of residence. I certify that the event extended a meal provision for which I was billed. I declare and affirmined by me, and to the best of my knowledge and belief, is in a 5-22-19 Date
	Date
I hereby certify that the above employee was authorized to i	norization neur the claimed expenses at their headquarters station or place of some on behalf of the State of South Dakota. I attest that the of state interests.
Dustin Oedekoven, DVM	State Veterinarian
Name of Department/Office Head	Position/Title of Agency Official
Land Columne Dvan	5-23-19
Signature of Department/Office Head	Date
State Board of	Finance Approval
Approval Date:	I munoc Approvar
The state of the s	Signature of Secretary State Board of Finance

Note: When completed, attach the original form and receipts to voucher to be sent to the State Auditor's Office.

	Invo	ice						<u>_</u> /	700
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SD ANIMAL INDUSTRY BOARD

411 South Fort Street Pierre, South Dakota 57501-4503

Phone: (605) 773-3321

Fax: (605) 773-5459

South Dakota Cattle Identification Advisory Committee May 22, 2019 Pierre, SD

10:00AM

Welcome & Introductions

10:15AM

- A. Review of USDA's ADT rule Cattle
 - 1. Official identification defined
 - 2. Documentation requirements
 - 3. Approved tagging sites
- B. Review of ADT in SD
 - 1. SD Admin Rules recent revisions
 - 2. Cattle requirements interstate and intrastate
 - a. Existing gaps in cattle traceability
 - 3. Livestock sector roles in traceability
 - a. Auction markets and dealers
 - b. Veterinarians
 - c. Slaughter plants
 - d. Producers
- C. USDA changes announced -Aaron Scott, DVM, PhD, DACVPM
 - 1. Transition away from NUES tags timeline
 - 2. RFID 840 tags LF vs. UHF
 - 3. USDA plans to cost share RFID tags
 - 4. ID of feeder cattle
 - 5. USDA funds for UHF backtag projects
 - 6. ADT projects in progress -reports from NIAA Apr 2019
- D. Future ADT for cattle in SD
 - 1. Identifying adult feeding cows/bulls
 - 2. Moving towards RFID next steps

4:00PM

Adjourn

ATTENDANCE ROSTER

DATE

05-22-19

PAGE 1

PURPOSE OF MEETING	SD CATTLE IDENTIFICATION ADVISORY COMMITTEE				
PLEASE PRINT FIRST AND LAST NAME	ADDRESS	REPRESENTING			
Judson Seaman	80 Box 1711 RCSN 57709	Dakota Turitory Buttale			
MVA. Waster and American	314 S. Henry Street	USDA APHIS VS			
Lovell Mesman					
Tyrel Lembke	19854 294 Ave Green Paywi 500 S. Wushington St	American Foods Group			
Chal Mc Quale	2905 Nedgewood Ar.	American Foods Croup			
James Halverson	2905 Nedgenes DAG. Yaktu SA BOX 7/3 Sundency Wy	SU Stockyjowns			
Carolyn Gers	Emery	SPAIB			
Rocky Form	Huran SD	Farmir's Union			
Alled Walth	Huran SD. 13640 Walth Bay Rd Glenham, S.D.	SDCA -			
Marc Hammrich	Abordeen, SD	SDATE			
Dani Hansa	Pierre , Sn	SDDA -			
Bigan Wagel	Augh SD	WAIB -			
Distra Odeken	SO A=3	frese 1			
Alex Heim	Wood SD	DTB4			
Shorty Zilverberg		DCI			

ATTENDANCE ROSTER

DATE 05-22-19 SD CATTLE IDENTIFICATION ADVISORY COMMITTEE **PURPOSE OF MEETING** PLEASE PRINT FIRST AND LAST NAME **ADDRESS** REPRESENTING Tom Brunner John Vorgel ryan Hanson SDLMA M4 N/ Zuezvien [10052 White River 50 SDAIB Bred courcil St Orge 50 SD Auction No- Kess Pierre SI) Terry Johnson SDAIB Dr Scott Ft Collins, USDA Speaker

PAGE 2

ATTENDANCE ROSTER

DATE	05-22-19		PAGE 3
PURPOSE OF MEET	ΓINGS	SD CATTLE IDENTIFICATION	N ADVISORY COMMITTEE
PLEASE PR FIRST AND LAS		<u>ADDRESS</u>	REPRESENTING
MENTEL M	ILLER	PIERRE	AIB
July Foe Joh	MSTM	Hosmer	Hosma Vet Cline
Albhie Tra		Pierre	Brand Board
Tammy Anders	44	Piorre	SDAIB
Craig T Hans		Vilas S.P.	SPAIB
Wesley We		Belle Found S)	wood vex clinic
SusanReend	I	Pierre, SD	SDAIB

Home Station Per Diem Reimbursement Request - SDCL 3-9-2.2

When Application and Authorization sections are completed, please submit the original to:

State Board of Finance - Office of Secretary of State Capitol Building - 500 E Capitol Ave - Pierre, SD 57501

Phone: 605-773-3537

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

	Application	
Date: 5-21-19	Agency:	SD Bureau of Finance and Management
Agency Address: 500 East Capitol Ave		57501
Agency Phone Number: 605-773-3411		
Employee Requesting Reimbursement: Liz	za Clark, SD Chief F	nance Officer
Total Amount of Reimbursement: 12750		
Date(s) of Expense: 5-23-19		
Event Leave Time: 10 am	Event Ret	urn Time: 4 pm
Explanation of official business performed:		cil of Economic Advisors Meeting held in the Capitol Bldg,
Gov's Large Conf Rm, Pierre. Meeting has a working lunch	for four Bureau of Finance and M	lanagement employees and eleven out of town board members.
State Employees with the home station of Pierre t	hat we are requesting home	e station per diem reimbursement for are Liza Clark,
SD Chief Finance Officer, Secretary of Revenue	Jim Terwilliger, and two BF	M interns Brooks Van Osdel and Kyle Schluttner.
under the penalties of perjury that this claim has things true and correct. Once Karper Signature of Employee	is been examined by me,	rovision for which I was billed. I declare and affirm and to the best of my knowledge and belief, is in all $5-24-69$
I hereby certify that the above employee was aurresidence while performing necessary duties of employee's participation in the event was in the Liza Clark Name of Department/Office Head	f their employment on bel furtherance of state interes	ed expenses at their headquarters station or place of half of the State of South Dakota. I attest that the sts. C-O sition/Title of Agency Official
•	Po	1 /
hiza Clark		5/29/19
Signature of Department/Office Head	Da	
State 1	Board of Finance A	approval
Approval Date:		
Note: When completed, attach the origina	Signature of Signa	of Secretary, State Board of Finance oucher to be sent to the State Auditor's Office.



DEPARTMENT OF EXECUTIVE MANAGEMENT BUREAU OF FINANCE AND MANAGEMENT

500 East Capitol Ave. • Pierre, South Dakota 57501-5070 • Voice: (605) 773-3411 • Fax: (605) 773-4711

Governor's Council of Economic Advisors Meeting May 23, 2019

Governor's Large Conference Room Capitol Building Pierre, SD 57501

11:00 AM –12:00 PM Roundtable Discussion of Economic, Business, and Industry Trends

 Council discussion on specific regional areas of the state and how those regions are performing economically, including any possible positive or negative developments that could impact the state economy and the revenue streams for the state in 2019-2020.

12:00 PM -1:30 PM

Update on most recent US economic forecast/SD economic trends

- Dr. Ralph Brown will present the most recent IHS Economics forecast for the United States economy as well as recent trends in the South Dakota economy including trends in employment, income and various other economic indicators specific to South Dakota.
- Council discussion on agriculture, tourism, manufacturing, financial services as well as other sectors that have a large presence in the state and how those specific sectors are preforming or are expected to perform over the two years.

1:30 PM - 2:30 PM Overview of SD economic forecast and recent tax collection trends

 Jim Terwilliger will present recent general fund revenue collection trends for major revenue sources that populate the state general fund and how those collection trends compare to the most recent budgeted levels and historical growth rates.

2:30 PM Public Comment

Adjourn



125 S. Van Buren, Pierre, SD 57501 605-224-6165

Date	1-3-17	605-224-6165		
Customer's Na	DO E. Capital Sur Pieme SD 57501	+ Mara Memo	<i>t</i> :	
Address	DOE Capital Sui	tc217 1	Jorean K	
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O Cash O C	harge O ROA Rcv			
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	15 Sack lunches:	8.50	127.50	
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	Fruit cep Papien Sporm Catering fee		19.13	
) (
	•			
No				
		SUB-TOTAL	146.63	
		Tax	lyent	

TOTAL AMT. \$ 140.03

All invoices due 15 days upon receipt.

A 1.5% service charge will be applied to unpaid balances with a minimum \$5.00 fee.

Please pay from this invoice, no statement will be sent.

We know you have many choices. Thank you for choosing us.

<u>Home Station Per Diem Reimbursement Request – SDCL 3-9-2.2</u>

When Application and Authorization sections are completed, please submit the original to:

State Board of Finance Office of Secretary of State Capitol Building - 500 E Capitol Ave

Pierre, SD 57501 Phone: 605-773-3537

			Application
Date:	06/06/19		Agency: SDRS
Agenc	y Address:	222 E. Capitol Ave,	Pierre, SD 57501
Agenc	y Phone Num	nber: 605-773-3731	
Emplo	yee Requesti	ng Reimbursement:	
Total A	Amount of Re	eimbursement: \$33	37.80
) of Expense:	$\Delta Q I \Delta E I A \Delta$	
	•	8:30 a.m.	Event Return Time: 4:00 p.m.
		ial business performed:	Joint SDRS Board of Trustees/SD Investment
-			DRS and SDIC board, staff, and consultants
		leave during lunch.	
under th things tr	e penalties of pe ue and correct.	erjury that this claim has been	included a meal provision for which I was billed. I declare and affirm a examined by me, and to the best of my knowledge and belief, is in all
Signan	are of Employ	yee	Date
•			Authorization
residenc	e while perform	above employee was authorizing necessary duties of their in the event was in the furth	zed to incur the claimed expenses at their headquarters station or place of employment on behalf of the State of South Dakota. I attest that the erance of state interests.
Robe	rt A. Wylie		Executive Director
Name	Departmen	t/Office Head	Position/Title of Agency Official
Ell	I All	K	6-5-19
Signatu	ire of Depart	ment/Office Head	Date
		State Boa	rd of Finance Approval
Approv	al Date:		
-Ph.o.			Signature of Secretary, State Board of Finance

Note: When completed, attach the original form to voucher to be sent to the State Auditor's Office.



ROLL'N PIN CAFÉ GRILLE

3015 W Russell Street Sioux Falls, SD 57107 605.339.9191 www.rollnpin.com

Invoice	
Customer: S. D. Investment Council	SO Retire mut Switzer
Location:	· · · · · · · · · · · · · · · · · · ·
Date: 6 - 5-19	

DESCRIPTION	UNIT PRICE	QUANTITY	COST
Lunch	\$74 <u>9</u>	41	#30701
-including-			
Assorted Croissant Sands - 2 Salad Potato Chips - Pressles - Treats	20 -		
			.1.
		SUBTOTAL	3070
	STAFF GRATUITY	SUBTOTAL	13374
	TAX	.075	TE TO
		TOTAL	F1564EP

Thank you!

Randy

SDRS BOARD OF TRUSTEES LUNCH

June 5, 2019

Name	Name
Briff F/15Ge Jon Hunker	Zoh Wilse
Jon Hunker	Jam / Att
Kyle Shlythore	Jan Jaddloor
Brook Van Osdel	1 at m
liza clark	YARRYLANGRE
KEVEN MERCELL	heith Brzinard
Myron Johnson	Dawn SmHh
-teny Brunks	Larin Brass
Ji the lys	Pal School
Killelinden	Pro Berkhan
Eric Stroeder	Jeff Welson
Ryan Burn	Christer Sites
Britishe Adamson	
Trais denge	
James Athurater	
Ore Kulesa	
Michille Mikkelson	
Ryan Mikkelsen	
Josh Hooks	
Lausie Gustatson	
Joff Hallen	
Jucque Storm	·
Jou Ben Hou Hoba	
Jou Cloba	
Luna Koepsell	
Karl Alberra	
Some	
Xarrie Riss Mark Salter	
Juane Salver	

Home Station Per Diem Reimbursement Request - SDCL 3-9-2.2

When Application and Authorization sections are completed, please submit the original to:

State Board of Finance - Office of Secretary of State Capitol Building - 500 E Capitol Ave - Pierre, SD 57501 Phone: 605-773-3537

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

Application
Date: 4-1-19 Agency: GF & P
Agency Address: 523 fast Capital Ave. Pierre SD 57501
Agency Phone Number: <u>605 - 773 - 3387</u>
Employee Requesting Reimbursement: LVCAS Strong
Total Amount of Reimbursement: 934.74
Date(s) of Expense: $\frac{3-1-19}{9-3-31-19}$
Event Leave Time: 5:30 AM Event Return Time: 9:00 PM
Explanation of official business performed: Post Academy, Fraud training
Officer-in-service, WTO field training expenses
The state of the s
V
under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in al things true and correct. Signature of Employee Date
Authorization I hereby certify that the above employee was authorized to incur the claimed expenses at their headquarters station or place of residence while performing necessary duties of their employment on behalf of the State of South Dakota. I attest that the employee's participation in the event was in the furtherance of state interests. Name of Department/Office Head Position/Title of Agency Official O 7 19 Signature of Department/Office Head Date
State Board of Finance Approval
Approval Date:
Signature of Secretary, State Board of Finance Note: When completed, attach the original form and receipts to voucher to be sent to the State Auditor's Office.

Game Fish and Parks

Direct Invoice

Beth AP EMPLOYEE EXPENSE WORKSHEET 1 EWS-1T	
NEXT FUNCTION: ACTION: 04/08/2019 22:08:55 REQUEST:	
EMP VOUCHER NBR:Z069RB07 DATE: 03/31/2019 MODEL:	
EMP SHORT NAME : STRONGLUCAS STRONG, LUCAS CURR:	
EMPLOYEE NUMBER:157485 ABERDEEN	
TRAVEL BEG DATE:03/04/2019APPROVAL NBR: MULTI PYMT: N	
TERMS CODE: PYMT DUE DATE: 04/08/2019 DO NOT USE :	
REMIT MSG: TRAVEL_FROM_03/04-03/31/2019	
SIGNATURE APPR CD:	
LINE AMOUNT/PERCENT EXP CO ACCOUNT CENTER PROJ-CO NUMBER	
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GROSS AMOUNT:924.14	
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declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true	and correct.
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Y. W.	
O4/08/2019	
Claimant Date Authoritation Date	

2049RB07

STATE OF SOUTH DAKOTA TRAVEL PAYMENT DETAIL

NAME Lucas Strong ORGANIZATION Game Fish and Parks **ADDRESS** 1526 S. Lincoln Street BUDGET ENTITY 0610520 Aberdeen, SD 5741 Invoice ID Date Employee No Return Date Adv Exp License No Home Station 03/31/2019 157485 03/31/2019 7-9656A Pierre Dates Description of Travel, Destination Time Project Auto Trans. Overnight Non-Over-Miscellaneous Mo/Day Misc Expense, DOT Coding Leave Return Code Miles Cost Meals Ngt Meals Expense Pierre - Post Academy 3-4 5:30AM 1 F \$ 32.00 Pierre - Post Academy LE 32.00 3-6 Pierre - Post Academy LE 32.00 \$ 3-7 Pierre - Post Academy LE \$ 32.00 3-8 Pierre - Post Academy LE \$ 32.00 3-9 Pierre - Post Academy LE 32 00 S 3-10 Travel: Fort Pierre to Mitchell ΙF 151 63.42 \$ 3-11 Mitchell - Fraud Training LE 32.00 3-12 Travel: Mitchell to Fort Pierre LE 151 \$ 63.42 3-13 Pierre - Post Academy ΙF \$ 32.00 3-14 Pierre - Post Academy LE 32.00 3-15 Pierre - Post Academy LE 32.00 \$ 3-16 Pierre - Post Academy 1 F \$ 32.00 3-17 Pierre - Post Academy LE 32.00 3-18 Pierre - Post Academy LÉ \$ 32.00 3-19 Pierre - Post Academy LE \$ 32.00 3-20 Pierre - Post Academy LE 32.00 Pierre - Post Academy 3-21 LË \$ 32.00 3-22 Travel: Fort Pierre to Aberdeen 8:00PM LE 163 \$ 68.46 3-23 3-24 Travel: Aberdeen to Huron 10:00AM LE 91 \$ 38.22 3-25 Huron: Officer-in-service LE 15.00 3-26 Huron: Officer-in-service LE 15.00 3-27 Huron: Officer-in-service LE \$ 15.00 3-28 Travel: Huron to Aberdeen LE 91 \$ 38.22 3-29 Aberdeen - WTO Field Training LE 32.00 3-30 Aberdeen - WTO Field Training LE 32 00 3-31 Aberdeen - WTO Field Training 9:00PM LE \$ 32.00 SUBTOTALS 647 \$271.74 \$653.00 \$0.00 \$0.00 \$0.00 PURPOSE OF TRAVEL Post Academy, Fraud Training, Officer-in-service, WTO field training expenses GRAND TOTAL \$924.74 APPLY TO ADVANCE **AMOUNT** REIMBURSABLE \$924.74 I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my Knowledge and belief, $\frac{4-1-19}{\text{Date}}$

RECEIVED

Date

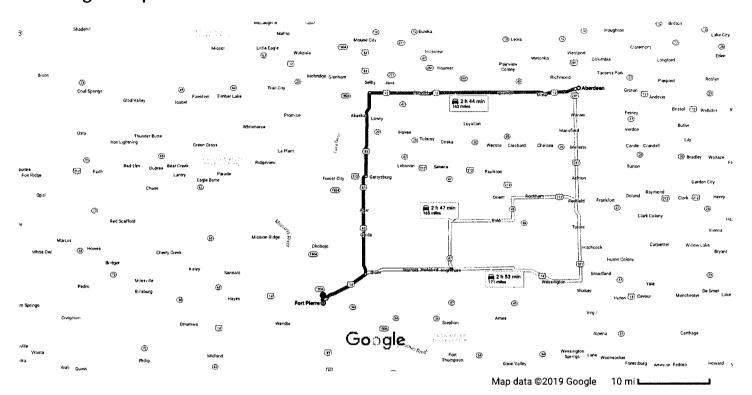
Authorization

APR 0 8 2019

Dept of Game, Plaff & Parkst Pierre, 50 87574

Gogle Maps Aberdeen, SD to Fort Pierre, SD 57532

Drive 163 miles, 2 h 44 min



Aberdeen

South Dakota 57401

Take S 3rd St to 6th Ave SW

5 min (1.5 mi)

1. Head north on Market St toward Railroad Ave SE

151 ft

2. Turn left onto Railroad Ave SE

0.2 mi

3. Railroad Ave SE turns left and becomes S 3rd St

0.2 mi

4. Turn right onto 3rd Ave SW

0.8 mi

5. Turn left onto S 15th St

0.2 mi

Follow US-12 W to US-83 S in Fort Pierre

2 h 39 min (161 mi)

6. Turn right onto 6th Ave SW

0.3 mi

7. Continue onto US-12 W/134th St

① Continue to follow US-12 W

74.3 mi

8. Turn left onto US-83 S

30.7 mi

₱ 9. Turn right onto US-212 W/US-83 S

Continue to follow US-83 S

36.2 mi

↑ 10. Turn right onto US-14 W/US-83 S

16.8 mi

11. Turn right onto E Elizabeth St

0.4 mi

12. Turn left onto N Poplar Ave

0.4 mi

↑ 13. Turn right onto US-83 S/W Sioux Ave

n Continue to follow US-83 S

2.1 mi

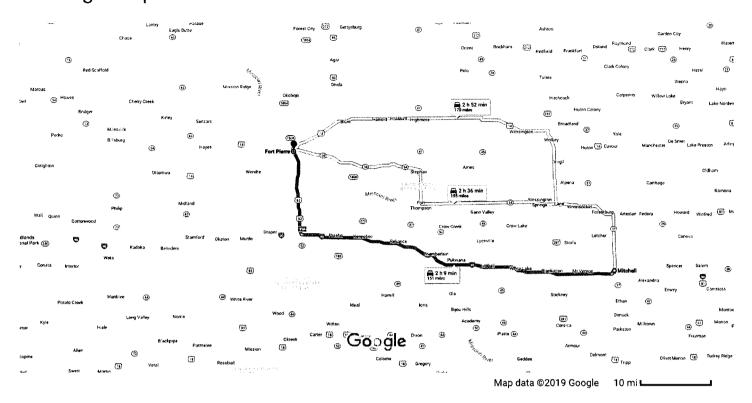
Fort Pierre

South Dakota 57532

These directions are for planning purposes only. You may find that construction projects, traffic, weather, or other events may cause conditions to differ from the map results, and you should plan your route accordingly. You must obey all signs or notices regarding your route.

Gogle Maps Mitchell, SD to Fort Pierre, SD 57532

Drive 151 miles, 2 h 9 min



Mitchell

South Dakota 57301

Get on I-90 W in Mitchell from S Sanborn Blvd, W Havens Ave and S Ohlman St

5 min (2.3 mi)

1. Head east on W 1st Ave toward S Sanborn Blvd

36 ft

Turn right at the 1st cross street onto S Sanborn Blvd

0.5 mi

3. Turn right onto W Havens Ave

0.9 mi

4. Turn left onto S Ohlman St

0.6 mi

🐧 5. Turn right to merge onto I-90 W

0.3 mi

Follow I-90 W to US-83 N in Vivian Township. Take exit 212 from I-90 W

1 h 36 min (117 mi)

↑ 6. Merge onto I-90 W

117 mi

7. Take exit 212 for US-83/SD-53

0.3 mi

8. Turn right onto US-83 N

28 min (31.3 mi)

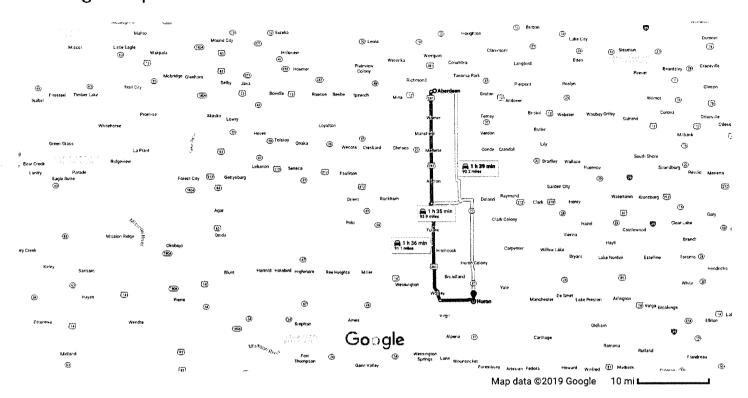
Fort Pierre

South Dakota 57532

These directions are for planning purposes only. You may find that construction projects, traffic, weather, or other events may cause conditions to differ from the map results, and you should plan your route accordingly. You must obey all signs or notices regarding your route.

Go gle Maps Aberdeen, SD to Huron, SD 57350

Drive 91.1 miles, 1 h 36 min



Aberdeen

South Dakota 57401

Take S 3rd St to 6th Ave SW

5 min (1.5 mi)

Head north on Market St toward Railroad Ave SE

151 ft

Turn left onto Railroad Ave SE

0.2 mi

Railroad Ave SE turns left and becomes S 3rd St

0.2 mi

Turn right onto 3rd Ave SW

0.8 mi

Turn left onto S 15th St

0.2 mi

Take US-281 S to Dakota Ave N in Huron

1 h 30 min (89.6 mi)

Turn right onto 6th Ave SW

0.3 mi

Turn left onto US-281 S

40.3 mi

8. Turn right onto US-281 S/E 7th Ave

• Continue to follow US-281 S

36.3 mi

9. Turn left onto US-14 E

12.2 mi

10. Turn right onto Dakota Ave N

0.5 mi

Huron

South Dakota 57350

These directions are for planning purposes only. You may find that construction projects, traffic, weather, or other events may cause conditions to differ from the map results, and you should plan your route accordingly. You must obey all signs or notices regarding your route.

Leidholt, Beth

From:

Petersen, Chris

Sent:

Thursday, November 29, 2018 4:33 PM

To:

Leidholt, Beth

Subject:

Fwd: Trainee Updated letters to attach to vouchers

From: "McFarland, David" < David.McFarland@state.sd.us>

Date: November 28, 2018 at 4:35:14 PM CST

To: "Petersen, Chris" < Chris.Petersen@state.sd.us>

Subject: RE: Trainee Updated letters to attach to vouchers

Chris, this is approved. - Dave

David McFarland

Director

Fleet & Travel Management **Bureau of Administration**

(505) 773-5550 Work (505) 295-1240 Mobile

David, McFarland @state.sd.us

Pierre, SD 57501

https://boa.sd.gov/fleet-travel...

From: Petersen, Chris

Sent: Wednesday, November 28, 2018 9:21 AM

To: McFarland, David < David.McFarland@state.sd.us>

Subject: FW: Trainee Updated letters to attach to vouchers

Hello David,

Below is a string of emails between the SD Department of Game, Fish & Parks and Fleet & Travel. Historically GFP has asked and received approval from Fleet & Travel to use the higher mileage (personal vehicle use) rate for a small group of GFP employees. Specifically, GFP is requesting high mileage rate approval for conservation officer trainees when they use personal vehicles to travel to field training locations.

With John DeLoache's retirement the State Auditors Office has asked GFP to reacquire high mileage rate approval from Fleet & Travel. If you have any questions feel free to contact me anytime. Thanks.

Chris

Chris Petersen | Finance Officer South Dakota Game, Fish and Parks 523 East Capitol Avenue | Pierre, SD 57501 605.773.3396 | Chris.Petersen@state.sd.us











From: DeLoache, John

Sent: Tuesday, April 25, 2017 7:53 AM

To: Petersen, Chris Cc: Leidholt, Beth

Subject: RE: Trainee Updated letters to attach to vouchers

High Mileage POV-1 is approved for the below request.

John De Loache

Director SD Fleet & Travel Management c/o 500 E. Capitol Ave Pierre, SD 57501-5070 605-773-6550 PH 605-773-3502 FAX john.deloache@state.sd.us

From: Petersen, Chris

Sent: Monday, April 24, 2017 10:31 PM

To: DeLoache, John Cc: Leidholt, Beth

Subject: RE: Trainee Updated letters to attach to vouchers

Hi John,

Below is a request from GFP back in 2015 asking for high mileage rate approval for GFP conservation officer trainees when using personal vehicles to travel to field training locations. The State Auditor's Office is asking for this long standing authorization to again be re-approved by Fleet & Travel. Would you approve of continuing the practice for our GFP trainees? Thanks.

Chris

Chris Petersen Finance Officer South Dakota Department of Game, Fish & Parks 605-773-3396

From: DeLoache, John

Sent: Tuesday, March 10, 2015 12:44 PM

To: Petersen, Chris

Subject: RE: Trainee Updated letters to attach to vouchers

Yes POV-1 High Mileage is granted as per the attached request for the Field Training of new trainees as required.

John De Loache

Director

SD Fleet & Travel Management

c/o 500 E. Capitol Ave Pierre, SD 57501-5070 605-773-6550 PH 605-773-3502 FAX john.deloache@state.sd.us

From: Petersen, Chris

Sent: Tuesday, March 10, 2015 11:56 AM

To: DeLoache, John

Cc: Tentinger, Jeremy; Alban, Andy

Subject: FW: Trainee Updated letters to attach to vouchers

Hey John,

Years ago GFP got approval from Fleet & Travel authorizing the Department to reimburse conservation officer trainees, at the high mileage rate, for use of their personal vehicles when driving to field training locations. The approval in 2005 is attached. Conservation Officer field training is provided by a veteran conservation officer at the officer's home duty station. Field training normally involves travel and a six week stay for the trainee. During the six week training stay, use of the trainee's personal vehicle removes concerns related to non-duty time and potential misuse of state owned vehicles. GFP would like to request continued authorization to reimburse conservation officer trainees at the high mileage rate. Thanks for the consideration.

Chris

Chris Petersen
Director of Administration
South Dakota Department of Game, Fish & Parks
605-773-3396



Office of the State Auditor

Steven J. Barnett, State Auditor Jason Lutz, Deputy State Auditor

500 East Capitol Avenue, Pierre, SD 57501-5070 Telephone: (605) 773-3341 ● Fax: (605) 773-5929 www.sdauditor.gov

Delayed Travel Reimbursement Request

Pursuant to the following Administrative Rule of South Dakota, a voucher received by the Office of the State Auditor after 60 days of the last day of a claimant's travel must be accompanied with this form. The below information must be completed and authorized by the agency official listed in the rule.

3:05:03:03.1. Voucher submission timing. A claim for travel expenses must be received by the state auditor within 60 days after the last day of travel. If this timeline is not met, written documentation on a form provided by the state auditor must be submitted by the claimant stating the reason for the delay in submitting the claim prior to determination by state auditor on allowance of the claim. The form must be signed by the head of a state agency, bureau, or any other unit or organization of state government; constitutional officer; or elected official of the office from which the claimant is seeking reimbursement. If the claimant is a department secretary or bureau commissioner, the form must be signed by the Governor.

General Authority:	SDCL 4-9-1.1.
Law Implemented:	SDCL 3-9-8, 4-9-1.1.
Claimant name: Invoice number:	Licas Strong
Reason for delay:	Home Only remandement process.
ArB.	4-8-2019
Claimant Signature	Date 4 15 (19
Agency Official Authoriza	tion Date